

TSD File Inventory Index

Date: July 21, 2008

Initial: CMH/evad

| | | |
|--|---|---|
| Facility Name: <u>Lantern Technologies Corporation (see folder file)</u> | | |
| Facility Identification Number: <u>ILD 055 413 371</u> | | |
| A.1 General Correspondence | | B.2 Permit Docket (B.1.2) |
| A.2 Part A / Interim Status | | .1 Correspondence |
| .1 Correspondence | ✓ | .2 All Other Permitting Documents (Not Part of the ARA) |
| .2 Notification and Acknowledgment | ✓ | C.1 Compliance - (Inspection Reports) |
| .3 Part A Application and Amendments | ✓ | C.2 Compliance/Enforcement |
| .4 Financial Insurance (Sudden, Non Sudden) | ✓ | .1 Land Disposal Restriction Notifications |
| .5 Change Under Interim Status Requests | | .2 Import/Export Notifications |
| .6 Annual and Biennial Reports | | C.3 FOIA Exemptions - Non-Releasable Documents |
| A.3 Groundwater Monitoring | | D.1 Corrective Action/Facility Assessment |
| .1 Correspondence | | .1 RFA Correspondence |
| .2 Reports | | .2 Background Reports, Supporting Docs and Studies |
| A.4 Closure/Post Closure | | .3 State Prelim. Investigation Memos |
| .1 Correspondence | | .4 RFA Reports |
| .2 Closure/Post Closure Plans, Certificates, etc | | D. 2 Corrective Action/Facility Investigation |
| A.5 Ambient Air Monitoring | | .1 RFI Correspondence |
| .1 Correspondence | | .2 RFI Workplan |
| .2 Reports | | .3 RFI Program Reports and Oversight |
| B.1 Administrative Record | | .4 RFI Draft /Final Report |

Total -1

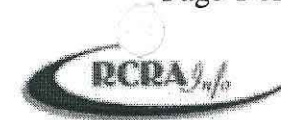
| | | | |
|--|--|--|--|
| .5 RFI QAPP | | .7 Lab data, Soil Sampling/Groundwater | |
| .6 RFI QAPP Correspondence | | .8 Progress Reports | |
| .7 Lab Data, Soil-Sampling/Groundwater | | D.5 Corrective Action/Enforcement | |
| .8 RFI Progress Reports | | .1 Administrative Record 3008(h) Order | |
| .9 Interim Measures Correspondence | | .2 Other Non-AR Documents | |
| .10 Interim Measures Workplan and Reports | | D.6 Environmental Indicator Determinations | |
| D.3 Corrective Action/Remediation Study | | .1 Forms/Checklists | |
| .1 CMS Correspondence | | E. Boilers and Industrial Furnaces (BIF) | |
| .2 Interim Measures | | .1 Correspondence | |
| .3 CMS Workplan | | .2 Reports | |
| .4 CMS Draft/Final Report | | F Imagery/Special Studies (Videos, photos, disks, maps, blueprints, drawings, and other special materials.) | |
| .5 Stabilization | | G.1 Risk Assessment | |
| .6 CMS Progress Reports | | .1 Human/Ecological Assessment | |
| .7 Lab Data, Soil-Sampling/Groundwater | | .2 Compliance and Enforcement | |
| D.4 Corrective Action Remediation Implementation | | .3 Enforcement Confidential | |
| .1 CMI Correspondence | | .4 Ecological - Administrative Record | |
| .2 CMI Workplan | | .5 Permitting | |
| .3 CMI Program Reports and Oversight | | .6 Corrective Action Remediation Study | |
| .4 CMI Draft/Final Reports | | .7 Corrective Action/Remediation Implementation | |
| .5 CMI QAPP | | .8 Endangered Species Act | |
| .6 CMI Correspondence | | .9 Environmental Justice | |
| | | | |

Note: Transmittal Letter to Be Included with Reports.

Comments: see full site

United States
Environmental Protection
Agency

Advanced Searches



Select the options with which to search:

All searches are based on an **and** condition. [Hint](#)

| | | | | | |
|---|-----------------------|---|---------|------------------------------------|------------------|
| Latitude / Longitude | Universes / Baselines | Activities | NAICS | | |
| Basic | Wildcard | Mail Address | Contact | Permit Contact | Owner / Operator |
| Handler ID: <input type="text" value="ILD055413371"/> | | Handler Name: <input type="text"/> | | | |
| Location Street Number: <input type="text"/> | | Location Street Name: <input type="text"/> | | | |
| Location City: <input type="text"/> | | Location State: <input type="text" value="Select"/> | | Location Zip: <input type="text"/> | |
| Location County: <i>Select a State First</i> | | State District: <input type="text"/> | | | |
| <input type="checkbox"/> Check this box to search on active sites only. | | <input type="checkbox"/> Click this box to also Search Other IDs. | | | |

[Search](#) [Reset Form](#) [Back to Main Menu](#)

Page: 1

There are 1 records, displaying 1 - 1. Select the handler to process.

| | Act Loc | ▲ Handler ID ▼ | ▲ Handler Name ▼ | ▲ Address ▼ | ▲ City ▼ | ▲ State ▼ | ▲ County ▼ | Active Status | In a Universe | Controls in Place |
|---|------------|----------------|---------------------------------------|----------------|----------|-----------|------------|------------------|------------------|----------------------|
| 1 | IL | ILD055413371 | LAMBERT TECHNOLOGIES CORP <i>N</i> | 3938 PORETT DR | GURNEE | IL | LAKE | H---- | Y | N |

Page: 1

URL: /rcrainfo/searches/search.jsp



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION 5
RCRA ACTIVITIES
P.O. BOX A3587
CHICAGO, ILLINOIS 60690

DEC 15 1988

JOHN NEIBAUR
MAZER CHEMICALS
3938 PORETT DR
GURNEE IL 60031

RE: EPA ID #: 1LDO55413371

In response to your request of NOV 28 1988 the following information
has been updated:

ACTIVITY: SMALL QUANT. GEN.

If you have questions, please contact Sharon Kiddon at (312)886-6173.

Sincerely,

A handwritten signature in cursive script, appearing to read "Arthur S. Kawatachi".

Arthur S. Kawatachi
Information Section
RCRA Program Management Branch

cc: State Agency
File -



UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION 5
RCRA ACTIVITIES
P.O. BOX A3587
CHICAGO, ILLINOIS 60690

OCT 27 1988

JOHN NEIBHUR
MAZER CHEMICALS
3938 PORETT DR
GURNEE IL 60031

RE: EPA ID #: ILD 055413371

In response to your request of OCT 03 1988 the following information
has been updated:

HAZ W. ACTIVITY! GEN

If you have questions, please contact Sharon Kiddon at (312)886-6173.

Sincerely,

A handwritten signature in cursive script, appearing to read "Arthur S. Kawatachi".

Arthur S. Kawatachi
Information Section
RCRA Program Management Branch

cc: State Agency
File ✓



OFFICE OF RCRA
Waste Management Division
U.S. EPA, REGION V

RECEIVED
SEP 21 1988

Mazer Chemicals 3938 Porett Drive Gurnee, Illinois 60031 Telephone: (312) 244-3410

September 19, 1988

Mr. Art Kawatachi
US EPA
Region 5
230 South Dearborn St.
Chicago, IL 60604

Dear Mr. Kawatachi:

We have material remaining from a toll project which has been declared a waste solvent, recently, by our client.

We are sending this material to a treatment facility per the owners' instructions. I have enclosed a form describing a temporary change of status from "small quantity generator" to "generator" to allow for this volume (~43,000 lbs).

Sincerely,

PPG/MAZER CHEMICALS

A handwritten signature in dark ink, appearing to read 'John E. Neibaur', written over the typed name.

John E. Neibaur
Associate General Manager

JEN:alr

RECEIVED

SEP 26 1988

IEPA-DLPC



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

230 SOUTH DEARBORN ST.

CHICAGO, ILLINOIS 60604

REPLY TO THE ATTENTION OF:

RCRA ACTIVITIES

attn: John Neibaur
MazER Chemicals Inc
3938 Perett Dr.
Gurnee IL 60031

2-29-88

RE: EPA ID #: ILD055413371

In response to your request of 12/87 the following information
has been updated:

installation changed from generator to small quantity generator

If you have questions, please contact Sharon Kiddon at (312) 886-6173.

Sincerely,

Arthur S. Kawatachi

Arthur S. Kawatachi
Information Unit
Program Management Section

cc: State Agency
File



RECEIVED
NOV 9 1988
OFFICE OF RCRA
Waste Management Division
U.S. EPA, REGION V

Mazer Chemicals 3938 Porett Drive Gurnee, Illinois 60031 Telephone: (312) 244-3410

November 8, 1988

RECEIVED

NOV 15 1988

IEPA-DLPC

Mr. Art Kawatachi
US EPA
Region 5
230 South Dearborn Street
Chicago, IL 60604

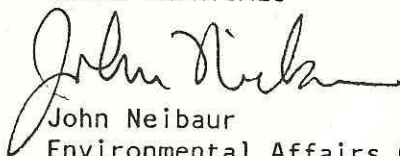
Dear Mr. Kawatachi:

I recently received a reclassification from "small quantity generator" to "generator" in order to send material from a toll project to a treatment facility.

We have now sent out this material and would like to return to our "small quantity generator" status. A form noting this change is enclosed.

Sincerely,

MAZER CHEMICALS


John Neibaur
Environmental Affairs Coordinator

JEN:alr

RECEIVED
NOV 28 1988

RCRA-IMS
U.S. EPA, REGION V

RECEIVED
NOV 28 1968

RCRA-IMS
U.S. EPA, REGION V



Mazer Chemicals, Inc. 3938 Porett Drive Gurnee, Illinois 60031 Telephone: (312) 244-3410

December 30, 1987

Mr. Art Kawatachi
US EPA
Region 5
230 South Dearborn Street
Chicago, IL. 60604

Dear Mr. Kawatachi:

I recently received a reclassification from "small quantity generator" to "generator" in order to send material from a toll project to a treatment facility.

We have now sent out this material and would like to return to our "small quantity generator" status. A form noting this change is enclosed.

Sincerely,

A handwritten signature in dark ink, appearing to read 'John Neibaur', written over the typed name.

John Neibaur
Environmental Affairs Coordinator

JEN:alr

cc: Brian Newquist - Illinois EPA



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

230 SOUTH DEARBORN ST.

CHICAGO, ILLINOIS 60604

attn: John Neibaur
Mazer Chemicals
3938 Porett DR
Gurnee IL 60031

REPLY TO THE ATTENTION OF:

Oct 19, 1987 - RCRA ACTIVITIES

RE: EPA ID #: ILD055413371

In response to your request of 9-28-87 the following information
has been updated:

Installation changed from a small quantity generator to generator
Waste codes per your notification

If you have questions, please contact Sharon Kiddon at (312) 886-6173.

Sincerely,

Arthur S. Kawatachi
Information Unit
Program Management Section

cc: State Agency
File

3938 PORETT DR.

GURNEE, ILLINOIS 60031

TELEPHONE (312) 244-3410

RECEIVED

SEP 28 1987

SOLID WASTE DIVISION
U.S. EPA, REGION V



mazer[®]
CHEMICALS, INC.

September 22, 1987

Mr. Art Kawatachi
U.S. EPA
Region 5
230 South Dearborn St.
Chicago, IL. 60604

Dear Art:

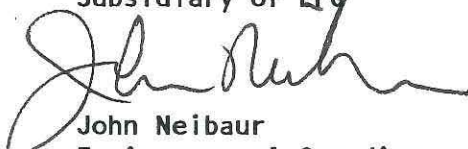
We have recently learned information from a client of ours regarding material we have from a recent toll project which makes this material "waste solvents".

We are sending the material to a treatment facility per the owner's instructions, however, the quantity involved (~30,000 lbs.) suggests I file temporary change of status from the current "small quantity generator" to "generator".

Enclosed is a form describing this change. This is a one-time occurrence after which I will resubmit notification returning us to "small quantity generator" status.

Sincerely,

MAZER CHEMICALS, INC.
Subsidiary of RPG


John Neibaur
Environmental Coordinator

JEN:alr

Enclosure

cc: Brian Newquist Illinois EPA

Allen Tolmsoff PPG/GO

CHANGE OF OWNER/OPERATOR

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028 Expires 10/31/99
GSA No. 0246-EPA-OT

Please refer to Section V, Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

PROGRAM MANAGEMENT BRANCH

Date Received
(For Official Use Only)
DEC 9 - 1997

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. Initial Notification

☒ B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

I L D O S 5 4 1 3 3 7 1

II. Name of Installation (Include company and specific site name)

B A S F Corporation

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

3 9 3 8 P o r e t t D r i v e

Street (Continued)

City or Town

G u r n e e

State

I L

Zip Code

6 0 0 3 1 -

County Code

0 9 7

County Name

L A K E

IV. Installation Mailing Address (See instructions)

Street or P.O. Box

3 9 3 8 P o r e t t D r i v e

City or Town

G u r n e e

State

I L

Zip Code

6 0 0 3 1 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

C A R I N G E L L O

(First)

M i k e

Job Title

E H S S u p e r v i s o r

Phone Number (Area Code and Number)

8 4 7 - 2 4 9 - 6 3 6 0

VI. Installation Contact Address (See instructions)

A. Contact Address Location Mailing

☒

B. Street or P.O. Box

3 9 3 8 P o r e t t D r i v e

City or Town

G u r n e e

State

I L

Zip Code

6 0 0 3 1 -

VII. Ownership (See instructions)

A. Name of Installation's Legal Owner

B A S F Corporation

Street, P.O. Box, or Route Number

3 0 0 0 C o n t i n e n t a l D r i v e

City or Town

M o u n t O l i v e

State

N J

Zip Code

0 7 5 2 5 - 1 2 3 4

Phone Number (Area Code and Number)

9 7 3 - 4 2 6 - 4 8 1 0

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

☒

No

(Date Changed) Month Day Year

1 2 0 1 9 7

0970355001

RCRIS ENTRY DEC 16 1997

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☒ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace
- ☐ 1. Smelter Deferral
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Recycling Marketer
- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device
- ☐ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Combustion Device(s)
- a. Transporter
- b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
- ☐ a. Process
- ☐ b. Re-refine

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)



2. Corrosive (D002)



3. Reactive (D003)



4. Toxicity Characteristic



(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

D 0 2 2

D 0 3 8

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

| |
|---------|
| 1 |
| F 0 0 3 |
| 7 |
| |

| |
|---------|
| 2 |
| F 0 0 2 |
| 8 |
| |

| |
|---------|
| 3 |
| F 0 0 5 |
| 9 |
| |

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|----|
| 4 |
| |
| 10 |
| |

| |
|----|
| 5 |
| |
| 11 |
| |

| |
|----|
| 6 |
| |
| 12 |
| |

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

| |
|---|
| 1 |
| |

| |
|---|
| 2 |
| |

| |
|---|
| 3 |
| |

| |
|---|
| 4 |
| |

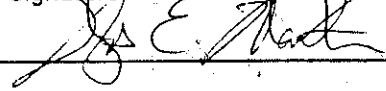
| |
|---|
| 5 |
| |

| |
|---|
| 6 |
| |

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature



Name and Official Title (Type or print)

Douglas E. Martin Counsel

Date Signed

11/21/97

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



89.1411

Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

Comments

[illegible]

MAZER CHEMICALS

Street or P.O. Box

[illegible]

Street or Route Number

[illegible]

Name and Title (last, first, and job title)

[illegible]

A. Name of Installation's Legal Owner

| | | | | | | | |
|---|-------|---------------------|-------|--|--|--|---|
| C | P P G | I N D U S T R I E S | I N C | | | | P |
| R | | | | | | | |

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

| A. Hazardous Waste Activity | | B. Used Oil Fuel Activities | |
|---|---|--|---|
| <input checked="" type="checkbox"/> 1a. Generator | <input checked="" type="checkbox"/> 1b. Less than 1,000 kg/mo | <input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter "X" and mark appropriate boxes below) | <div style="text-align: center;"> <div>RECEIVED</div> <div>NOV 28 1988</div> </div> |
| <input type="checkbox"/> 2. Transporter | | <input type="checkbox"/> a. Generator Marketing to Burner | |
| <input type="checkbox"/> 3. Treater/Storer/Disposer | | <input type="checkbox"/> b. Other Marketer | |
| <input type="checkbox"/> 4. Underground Injection | | <input type="checkbox"/> c. Burner | |
| <input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter "X" and mark appropriate boxes below) | | <input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification | <div style="text-align: center;"> <div>RECEIVED</div> <div>NOV 28 1988</div> </div> |
| <input type="checkbox"/> a. Generator Marketing to Burner | | | |
| <input type="checkbox"/> b. Other Marketer | | | |
| <input type="checkbox"/> c. Burner | | | |

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

VIII. Mode of Transportation (*transporters only — enter 'X' in the appropriate box(es)*)

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify) _____

X. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification
 ☒ B. Subsequent Notification (complete item C)

| ID — For Official Use Only | | | | | | | | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|-----|---|
| C | | | | | | | | | | | | | T/A | C |
| W | | | | | | | | | | | | | | |

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|-----------|---|---|----|----|----|
| 1 U056 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 |

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| 37 | 38 | 39 | 40 | 41 | 42 |
| 43 | 44 | 45 | 46 | 47 | 48 |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
|----|----|----|----|----|----|

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

- ☐ 1. Ignitable (D001)
 ☐ 2. Corrosive (D002)
 ☐ 3. Reactive (D003)
 ☐ 4. Toxic (D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|-------------------------------------|--|------------------------|
| Signature <i>John E. Neibaur</i> | Name and Official Title (type or print) JOHN E. NEIBAUER ENVIRONMENTAL COORDINATOR | Date Signed 11-4-85 |
|-------------------------------------|--|------------------------|

United States Environmental Protection Agency
Washington, DC 20460

Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

RECEIVED

SEP 26 1988

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)T/A C
1

I. Name of Installation

MAZER CHEMICALS

II. Installation Mailing Address

Street or P.O. Box

3938 PORETT DR

City or Town

State

ZIP Code

GURNEE

IL 60031

III. Location of Installation

Street or Route Number

3938 PORETT DR

City or Town

State

ZIP Code

GURNEE

IL 60031

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

NEIBAUER JOHN

312 244 3410

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

PPG INDUSTRIES INC

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

- ☒ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.
☐ 2. Transporter
☐ 3. Treater/Storer/Disposer 8-see attached
☐ 4. Underground Injection
☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner
☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

- ☐ A. Utility Boiler ☐ B. Industrial Boiler ☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)

X. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☐ A. First Notification ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ILD055413371

C

W

T/

X. Description of Hazardous Wastes (continued from front)**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|------|---|---|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 |
| U056 | | | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
| | | | | | |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
| | | | | | |
| 19 | 20 | 21 | 22 | 23 | 24 |
| | | | | | |
| 25 | 26 | 27 | 28 | 29 | 30 |
| | | | | | |

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| | | | | | |
| 37 | 38 | 39 | 40 | 41 | 42 |
| | | | | | |
| 43 | 44 | 45 | 46 | 47 | 48 |
| | | | | | |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
| | | | | | |

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)☒ 1. Ignitable
(D001)☐ 2. Corrosive
(D002)☐ 3. Reactive
(D003)☐ 4. Toxic
(D000)**XI. Certification**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

John E. Neibaur

Name and Official Title (type or print)

JOHN E. NEIBAUR
ASSOCIATE GENERAL MANAGER

Date Signed

9-19-88

United States Environmental Protection Agency
Washington, DC 20460

88.2268

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).**EPA Notification of Hazardous Waste****For Official Use Only**

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)C
FT/A C
1**I. Name of Installation**

MAZER CHEMICALS INC

II. Installation Mailing Address

Street or P.O. Box

C
3

3938 PORETT DR

City or Town

State

ZIP Code

C
4

GURNEE

IL 60031

III. Location of Installation

Street or Route Number

C
5

3938 PORETT DR

~~IL 600~~

City or Town

State

ZIP Code

C

GURNEE

IL 60031

Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

NEIBAUR JOHN

312 244 3410

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

PPG INDUSTRIES INC

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)**A. Hazardous Waste Activity****B. Used Oil Fuel Activities**

- ☐ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.
☐ 2. Transporter
☐ 3. Treater/Storer/Disposer
☐ 4. Underground Injection
☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner
☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**

- ☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)

First or Subsequent Notification

Enter 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☐ A. First Notification ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ILD055413371

| ID — For Official Use Only | | | | | | | | | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|-----|---|
| C | | | | | | | | | | | | | | T/A | C |
| W | | | | | | | | | | | | | | | |

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|-----------|-----------|-----------|----|----|----|
| 1 F003 | 2 F005 | 3 4188 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 |

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| 37 | 38 | 39 | 40 | 41 | 42 |
| 43 | 44 | 45 | 46 | 47 | 48 |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
|----|----|----|----|----|----|

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

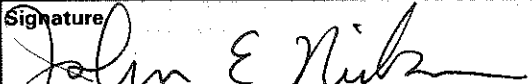
☒ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|--|---|-------------------------|
| Signature  | Name and Official Title (type or print) JOHN E. NEIBAUR ENVIRONMENTAL AFFAIRS COORDINATOR | Date Signed 12-31-87 |
|--|---|-------------------------|

United States Environmental Protection Agency
Washington, DC 20460

87.12015

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA Notification of Hazardous Waste**For Official Use Only**

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)C
F~~ILD055413371~~ T/A C
1**I. Name of Installation**

MAZER CHEMICALS INC

II. Installation Mailing Address

Street or P.O. Box

C
3

3938 PORETT DR

City or Town

State

ZIP Code

C
4

GURNEE

IL 60031

III. Location of Installation

Street or Route Number

C
5

3938 PORETT DR

City or Town

State

ZIP Code

C
3

GURNEE

IL 60031

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

NEIBAUER JOHN

312 244 3410

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

PPG INDUSTRIES INC

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)**A. Hazardous Waste Activity****B. Used Oil Fuel Activities**

- ☒ 1a. Generator * ☐ 1b. Less than 1,000 kg/mo.
☐ 2. Transporter
☐ 3. Treater/Storer/Disposer *- See attached letter
☐ 4. Underground Injection
☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner
☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)**IX. First or Subsequent Notification**

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☐ A. First Notification☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

OK ILD055413371 ✓

| ID — For Official Use Only | | | | | | | | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|-----|---|
| C | | | | | | | | | | | | | T/A | C |
| W | | | | | | | | | | | | | | |

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|------|------|------|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 |
| F003 | F005 | 4188 | | | |
| 7 | 8 | 9 | 10 | 11 | 12 |
| | | | | | |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
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| 19 | 20 | 21 | 22 | 23 | 24 |
| | | | | | |
| 25 | 26 | 27 | 28 | 29 | 30 |
| | | | | | |

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| | | | | | |
| 37 | 38 | 39 | 40 | 41 | 42 |
| | | | | | |
| 43 | 44 | 45 | 46 | 47 | 48 |
| | | | | | |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
| | | | | | |

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

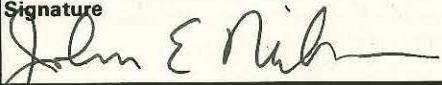
☒ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|--|---|------------------------|
| Signature  | Name and Official Title (type or print) JOHN E NEIBAUR ENV. AFFAIRS COORDINATOR | Date Signed 9-22-87 |
|--|---|------------------------|

OK

United States Environmental Protection Agency
Washington, DC 20460

Notification of Hazardous Waste

87.9625

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

RECEIVED

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)

JUL 20 1987

IEPA/DI PC

I. Name of Installation

MAZER CHEMICALS INC

II. Installation Mailing Address

Street or P.O. Box

3938 PORETT DR

City or Town

GURNEE

State

ZIP Code

IL 60031

III. Location of Installation

Street or Route Number

3938 PORETT DR

City or Town

GURNEE

State

ZIP Code

IL 60031

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

NEIBAUR JOHN

312 2244 3410

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

PPG INDUSTRIES INC

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

- ☐ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.
- ☐ 2. Transporter
- ☐ 3. Treater/Storer/Disposer
- ☐ 4. Underground Injection
- ☐ 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner

- ☐ 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner

- ☐ 7. Specification Used Oil Fuel Marketer or Burner Who First Claims the Oil Meets the Specification

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☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☒ A. First Notification ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

| ID — For Official Use Only | | | | | | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|--|--|--|--|-------|
| C | | | | | | | | | | | | T/A C |
| W | | | | | | | | | | | | |

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|-----------|-----------|---|----|----|----|
| 1 F003 | 2 F005 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 |

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

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|----|----|----|----|----|----|
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C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| 37 | 38 | 39 | 40 | 41 | 42 |
| 43 | 44 | 45 | 46 | 47 | 48 |

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
|----|----|----|----|----|----|

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)


☒ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|--|--|------------------------|
| Signature  | Name and Official Title (type or print) JOHN E NEIBAUR ENVIRONMENTAL COORDINATOR | Date Signed 6-23-87 |
|--|--|------------------------|

**C.2 Compliance/
Enforcement**



Land and Chemicals Division

Type of Document: Return to Compliance Letter

Facility Name: Lambent Technologies Corporation
Facility Location: 3938 Porett Drive
Facility City: Gurnee
Facility State: Illinois
Facility ZIP Code: 60031-1281
U.S. EPA ID Number: ILD 055 413 371

| Assigned Staff | | | |
|------------------|------------|--------|--------|
| Jamie L. Paulin | (LCD/RCRA) | Phone: | 6-1771 |
| Cynthia Kawakami | (ORC) | Phone: | 6-0564 |

| Name | Signature | Date |
|------------------------------|-----------------------|----------------------------------|
| Author | Jamie L. Paulin | X <i>Jamie L. Paulin</i> 3/12/08 |
| Section Chief Initial Review | Mary Setnicar | X <i>M. Setnicar</i> 3/12/08 |
| ORC Attorney | Cynthia Kawakami | X |
| ORC Section Chief | | X |
| Section Chief | | X |
| Branch Chief | Willie H. Harris | X |
| Division Director | Margaret M. Guerriero | X |
| Regional Administrator | Mary A. Gade | X |

Directions/Request for Clerical Support:

After the Section Chief/Branch Chief/Division Director/Regional Administrator signs this sheet and original letter:

Date stamp the cover letter;

Make three copies of the contents of this folder:

- One copy for the assigned staff;
- One copy for the section file; and
- One copy for the official file.

Make any additional copies for cc's or bcc's

cc's: *Cynthia Kawakami (C-145)*

bcc's:

Mail the original certified mail and distribute office copies and cc's and bcc's.

Once the certified mail receipt is returned:

File the certified mail receipt (green card), with this sign-off sheet and the official file copy, and take to 7th floor RCRA file room;

E-mail staff the date that the letter was received by facility.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF:

LR-8J

13 MAR 2008

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Louis Skibicki
Senior Environmental Specialist
Lambent Technologies Corporation
A Petroferm Company
3938 Porett Drive
Gurnee, Illinois 60031-1281

Re: Notice of Violation
Lambent Technologies Corporation
EPA I.D. No.: ILD 055 413 371

Dear Mr. Skibicki:

On August 2, 2007, a representative of the United States Environmental Protection Agency (U.S. EPA) inspected Lambent Technologies Corporation (Lambent) facility, located in Gurnee, Illinois. In response to violations of the Illinois Administrative Code (IAC) and the United States Code of Federal Regulations (CFR) identified during the inspection, the U.S. EPA issued a Notice of Violation to Lambent on November 9, 2007. Subsequent to the U.S. EPA's Notice of Violation, Lambent submitted additional information regarding the identified violations in correspondence dated December 6, 2007.

This letter is to inform Lambent that U.S. EPA has reviewed the referenced response, and does not plan additional enforcement action at this time. This letter does not limit the applicability of the requirements evaluated, or of other federal or state statutes or regulations. U.S. EPA and the Illinois Environmental Protection Agency (IEPA) will continue to evaluate Lambent in the future.

If Lambent has any questions or concerns regarding this matter, please contact Jamie L. Paulin, of my staff, at (312) 886-1771.

Sincerely,

A handwritten signature in cursive script, reading "Mary Setnicar".

Mary Setnicar, Acting Chief
Compliance Section 1
RCRA Branch
Land and Chemicals Division

cc: Todd Marvel, IEPA

7001 0320 0006 01A5 6333

| | | |
|---|--------|--|
| U.S. EPA 77 W JACKSON BLVD CHICAGO, IL 60604 ATTN: Jamie Paulin | | DE 97 |
| Postage | \$.41 | CHICAGO IL MAR 13 2008 USPO Postmark Here |
| Certified Fee | 2.05 | |
| Return Receipt Fee (Endorsement Required) | 2.15 | |
| Restricted Delivery Fee (Endorsement Required) | | |
| Louis Skibicki Senior Environmental Specialist Lambent Technologies Corporation A Petroferm Company 3938 Portett Drive Gurnee, IL 60031-1281 | | |
| PS Form 3800, January 2001 See Reverse for Instructions | | |



3938 Porett Drive • Gurnee, IL 60031 • Phone (847) 244-3410 • Fax (847) 244-6935 • www.petroferm.com

December 6, 2007

Ms. Jamie Paulin
US Environmental Protection Agency
Region V
77 West Jackson Blvd. LR-8J
Chicago, IL 60604



RE: Notice of Violation
RCRA Compliance Evaluation Inspection – Lambent Technologies
EPA I.D. No.: ILD 055 413 371

Dear Ms. Paulin:

This correspondence is being submitted in response to a Notice of Violation (NOV) issued by the US Environmental Protection Agency to Lambent Technologies on November 9, 2007. The NOV cited 3 infractions of RCRA rules. Specifically:

1. Lambent was storing one 55-gallon container and three 5-gallon containers of hazardous waste without an accumulation date and without the words, "Hazardous Waste" marked on each container.
2. Lambent was storing approximately twenty containers without proper aisle space in the hazardous waste storage area.
3. Lambent was missing a land disposal restriction notification form for one shipment of hazardous waste, manifest number, AR1457601.

While the Agency could have issued an order assessing a civil penalty for any past or current violations the Agency has chosen not to do so in this case, but rather requested that Lambent submit a response to each of these infractions documenting the actions which have been taken to establish compliance with the applicable regulatory requirements. Lambent's responses are as follows:

1. Improperly marked containers -

Accumulation dates, for the containers in question, were ascertained from the weekly inspection records. Labels with the words "Hazardous Waste" and the proper accumulation dates were then placed on these containers immediately after the completion of the inspection.

2. Improper aisle space –

As noted in the NOV, Lambent Technologies was storing approximately 20 containers in the hazardous waste area at the time of the inspection. There is adequate space in the hazardous waste area to allow for the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment when containers are placed properly. Unfortunately, at the time of the inspection a number of containers were not properly placed which resulted in inadequate aisle space. Again, this situation was rectified immediately after the inspection was completed. Once the containers were properly placed adequate aisle space was reestablished. Furthermore, in order to insure that this situation does not reoccur Lambent will institute the following:

- a. The issue of proper container placement and the importance of maintaining proper aisle spacing will be stressed/reinforced in all future hazardous waste training sessions for operating personnel and
- b. Proper aisle spacing will be monitored during the weekly hazardous waste area inspection and a record will be kept documenting compliance.

3. Missing LDR form –

Lambent has contacted the TSDF facility that received this shipment and is in the process of obtaining a facsimile copy of the appropriate LDR. Once this LDR is retrieved a copy will be attached to manifest AR1457601 completing the file.

Lambent Technologies believes these actions fully rectify these infractions. If, however, you have any questions or need additional information please don't hesitate to contact me at 847-249-6342.

Sincerely,



Louis Skibicki
Sr. Environmental Compliance Specialist

Spiros
Bourgikos/R5/USEPA/US

11/05/2007 09:28 AM

To

Subject Lambent Technologies Corporation NOV

On behalf of Lorna Jereza, I would like to inform you that on November 7, 2007, U.S. EPA will send by certified mail, the attached notice of violation (NOV) to Lambent Technologies Corporation (Lambent) located in Gurnee, IL. The alleged violations were found during U.S. EPA's August 2, 2007 compliance evaluation inspection of Lambent.

Contact: Jamie L. Paulin, (312) 886-1771



Lambent NOV ORC 11-2-07.doc

Spiros

Mr. Todd Marvel
EPA
1021 North Grand
Avenue East
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Springfield, IL
62794-9276

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Jamie

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LOUIS SKIBICKI

Street, Apt. No.; or P.O. Box No.

3938 Parett Drive

City, State, ZIP+4

Gurnee, IL 60031-1281

See Reverse for Instructions

PS Form 3800, July 1999



Land and Chemicals Division

Notice of Violation w/ Inspection Report & Checklist

Type of Document:

Facility Name:

Lambent Technologies

Facility Location:

3938 Porett Drive

Facility City:

Gurnee

Facility State:

Illinois

Facility ZIP Code:

60031-1281

U.S. EPA ID Number:

ILD 055 413 371

| Assigned Staff | | | |
|------------------|-------------|--------|--------|
| Jamie L. Paulin | (WPTD/ECAB) | Phone: | 6-1771 |
| Cynthia Kawakami | (ORC) | Phone: | 6-0564 |

| Name | Signature | Date |
|-------------------|-----------------------|----------|
| Author | Jamie L. Paulin | 10/31/07 |
| Regional Counsel | Cynthia Kawakami | 11/1/07 |
| ORC Section Chief | | |
| Section Chief | Lorna M. Jereza | 11/5/07 |
| Branch Chief | Willie H. Harris | |
| Division Director | Margaret M. Guerriero | |

Directions/Request for Clerical Support:

After the Section Chief/Branch Chief signs this sheet and original letter:

- Date stamp the cover letter;
- Make four copies of the contents of this folder:
 - a. One copy for the assigned staff;
 - b. One copy for the section file;
 - c. One copy for the branch file; and
 - d. One copy for the official file.
- Make any additional copies for cc's or bcc's

cc's:

bcc's:

Cynthia Kawakami, C-145

- Mail the original certified mail and distribute office copies and cc's and bcc's.

Once the certified mail receipt is returned:

- File the certified mail receipt (green card), with this sign-off sheet and the official file copy, and take to 7th floor RCRA file room;
- E-mail staff the date that the letter was received by facility.

OMS 11/9/07



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

SA 7/15
SL

NOV 9 2007

REPLY TO THE ATTENTION OF:

LR-8J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

7099-3400
9598 1151

Louis Skibicki
Senior Environmental Specialist
Lambent Technologies Corporation
A Petroferm Company
3938 Porett Drive
Gurnee, Illinois 60031-1281

Re: Notice of Violation
RCRA Compliance Evaluation Inspection – Lambent Technologies Corporation
EPA I.D. No.: ILD 055 413 371

Dear Mr. Skibicki:

On August 2, 2007, a representative of the United States Environmental Protection Agency (U.S. EPA) inspected Lambent Technologies Corporation (Lambent) facility, located in Gurnee, Illinois. The purpose of the inspection was to evaluate Lambent's compliance with certain provisions of the Resource Conservation and Recovery Act (RCRA); specifically, those regulations related to the generation, treatment and storage of hazardous waste. Please find enclosed a copy of the inspection report for your reference.

Based on information provided by Lambent personnel, review of records, and personal observations made by the inspector at the time of the investigation, the U.S. EPA has determined that Lambent is in violation of the Illinois Administrative Code (IAC) and the United States Code of Federal Regulations (C.F.R.).

To be eligible for the exemption from having a hazardous waste storage permit, Lambent must be in compliance with the conditions of 35 IAC §§ 722.134(a) and (c) [40 CFR § 262.34(a) and (c)].

We find that Lambent was in noncompliance with the following conditions for a hazardous waste storage permit exemption in violation of the following requirements:

1. A generator of hazardous waste must ensure that the date, upon which each period of accumulation begins, is clearly marked and visible for inspection on each container of hazardous waste, and while being accumulated on-site, each container of hazardous waste must be labeled or marked clearly with the words, "Hazardous Waste." See, 35 IAC §

722.134(a)(2) and (a)(3) [40 CFR § 262.34(a)(2) and (a)(3)]. At the time of the inspection, Lambent was storing one 55-gallon container and three 5-gallon containers of hazardous waste without an accumulation date and without the words, "Hazardous Waste," marked on each container.

2. A generator of hazardous waste must maintain aisle space to allow the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment to any area of facility operation in an emergency, unless aisle space is not needed for any of these purposes. *See* 35 IAC § 722.134(a)(4); 35 IAC § 725.135 [40 C.F.R. § 262.34(a)(4); 40 C.F.R. § 265.35]. At the time of the inspection, Lambent was storing approximately twenty containers of hazardous waste without adequate aisle space in the hazardous waste storage area.
3. A generator of hazardous waste must retain on-site a copy of all notices, certifications, waste analysis data, and other documentation produced pursuant to Land Disposal Restrictions. *See* 35 IAC § 728.107(a)(8) [40 C.F.R. § 268.7(a)(8)]. At the time of the inspection, Lambent did not meet this record keeping requirement of the land disposal restriction notification forms for one shipment of hazardous waste, manifest number, AR1457601.
4. A large quantity generator that accumulates hazardous waste on-site and does not meet the conditions for a permit exemption of 35 IAC § 722.134 and 40 C.F.R. § 262.34 is an operator of a hazardous waste storage facility, and is required to obtain an Illinois hazardous waste storage permit. *See* 35 IAC § 722.134(a) [40 C.F.R. § 262.34(a)]. Upon failing to meet the conditions identified in item numbers 1 and 2 listed above, Lambent became an operator of a hazardous waste storage facility. Lambent has not applied for or received a hazardous waste storage permit nor does Lambent have interim status. Lambent's failure to apply for and obtain a hazardous waste storage permit violated the permitting requirements of 35 IAC §§ 703.121 and 702.123 [adopting 40 C.F.R. §§ 270.1(c) and 270.10].

At this time, U.S. EPA is not requiring Lambent to apply for an Illinois hazardous waste storage permit, provided that Lambent immediately complies with the conditions for an exemption set forth in the regulations identified above.

Under Section 3008(a) of RCRA, 42 U.S.C. § 6928(a), U.S. EPA may issue an order assessing a civil penalty for any past or current violations and requiring compliance immediately or within a specified time period.

Although this letter is not such an order, we request that you submit a response in writing to this office no later than thirty (30) days after receipt of this letter documenting the actions, if any, which have been taken since the inspection to establish compliance with the above requirements.

You should submit your response to Jamie L. Paulin, United States Environmental Protection Agency, Region 5, 77 West Jackson Boulevard, LR-8J, Chicago, Illinois 60604. If you have any questions regarding this letter, please contact Ms. Paulin, of my staff, at (312) 886-1771.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Lorna M. Jereza for".

Lorna M. Jereza, Chief

ms
Compliance Section 1

RCRA Branch

Land and Chemicals Division

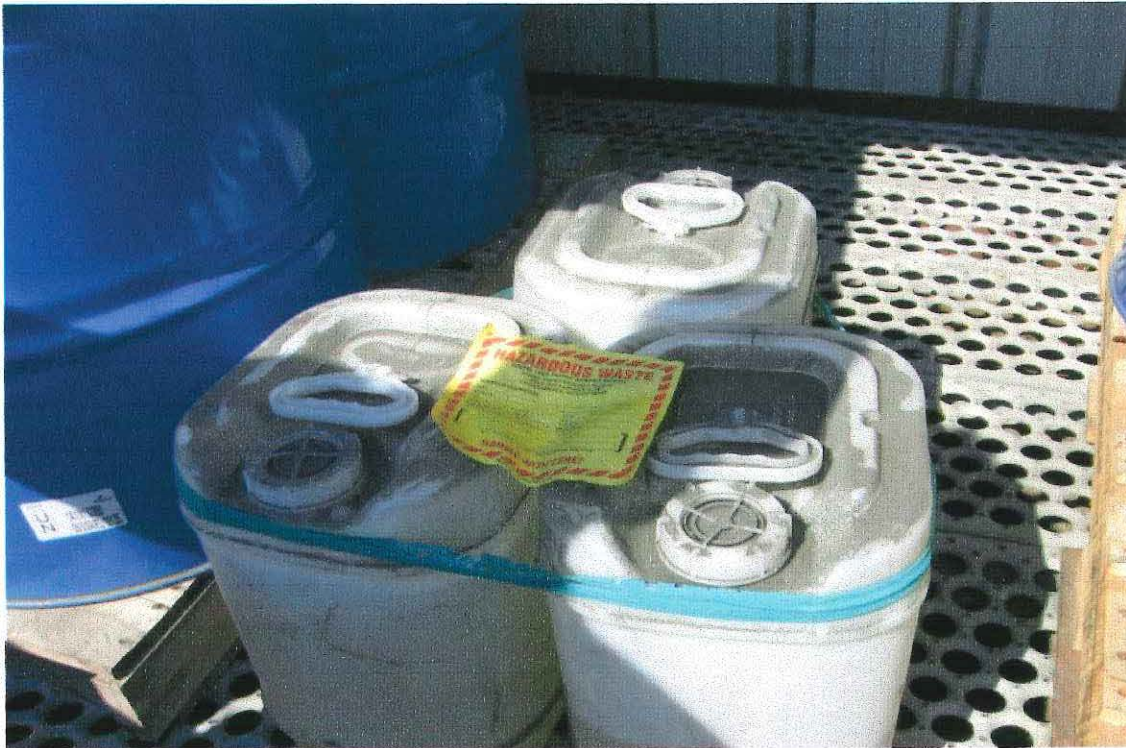
Enclosure

cc: Todd Marvel, Illinois Environmental Protection Agency

Attachment 1 – Photographs



Photograph 1 – Two 55-gallon containers of hazardous waste. No label was located on container positioned to the right, Hazardous waste label was peeling off of container positioned to the left.



Photograph 2 – Three plastic containers, storing flammable hazardous waste, were being stored without proper labels and with no accumulation date.



Photograph 3 - Three plastic containers, storing flammable hazardous waste, were being stored without proper labels and with no accumulation date.



Photograph 4 – One 55-gallon container of nickel-cadmium batteries, labeled as hazardous waste.



Photograph 5 – Overview of hazardous waste storage area.



Photograph 6 – Overview of hazardous waste storage area.



Photograph 7 – Non hazardous raw material that appeared to be leaking from container positioned to the left.



Photograph 8 – Empty container that was going to be used as a satellite accumulation area (SAA) container.



Photograph 9 – One 55-gallon container of flammable hazardous waste being stored in the quality control laboratory SAA.



Photograph 10 – Overview of scrap equipment storage area.



Photograph 11 – Overview of scrap material to be recycled.



Photograph 12 – Empty overpack containers, located in scrap equipment storage area.



Photograph 13 – Tanks storing processed EO and PO; located in front of a retention pond.



Photograph 14 - Overview of scrap equipment storage area.



Photograph 15 - Overview of scrap equipment storage area.



Photograph 16 – Storage of empty aerosol cans and nickel-cadmium batteries.



Photograph 17 – Storage of spill equipment.


| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|--|------------|
| | PART 722: STANDARDS APPLICABLE TO GENERATORS OF HAZARDOUS WASTE (>1000 KG/MO.) | |
| | SUBPART A: GENERAL | |
| 722.111 | Section 722.111 Hazardous Waste Determination Has the generator correctly determined if the solid waste(s) it generates is a hazardous waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.111 |
| | Have hazardous wastes been identified for purposes of compliance with Part 728? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 808.121(a) | Has the generator correctly determined if the solid waste(s) it generates is a special waste? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 808.121(a) |
| 722.112(a) | Section 722.112 USEPA Identification Numbers Has the generator obtained a USEPA identification number? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.112(a) |
| 722.112(c) | Has the generator offered its hazardous waste only to transporters or to treatment, storage or disposal facilities that have a USEPA identification number? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.112(c) |
| | SUBPART B: THE MANIFEST | |
| 722.120(a) | Section 722.120 General Requirements Does the facility manifest its waste off-site? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.120(a) |
| 722.120(b) | Does the manifest designate a facility permitted to handle the waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.120(b) |
| 722.120(d) | Has the generator shipped any waste that could not be delivered to the designated facility? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | 722.120(d) |
| 722.121(a) | Section 722.121 Acquisition of Manifests Has the generator used: - an Illinois manifest for wastes designated to a facility within Illinois? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.121(a) |
| 722.121(b) | - a manifest from the State to which the manifest is designated? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - an Illinois manifest if the State to which the waste is designated has no manifest of its own? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 722.121(b) |
| 722.122 | Section 722.122 Number of Copies Does the manifest consist of at least 6 copies? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.122 |
| 722.123(a) | Section 722.123 Use of the Manifest For each manifest reviewed, has the generator: - signed the certificate by hand? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - obtained the handwritten signature and the date of acceptance by the initial transporter? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - retained one copy as required by Section 722.140(a)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - apparently sent a copy (part 5 for the Illinois manifest) to the Agency within 2 working days? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.123(a) |
| 722.123(b) | - has the generator apparently given the remaining copies to the transporter? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.123(b) |
| 722.123(c) | - has the generator followed the procedures prescribed in Section 722.123 for manifesting bulk shipments of hazardous waste by rail or water? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.123(c) |

W. acid filled
batteries -

D001
F003
D001 D002 D022 F002 F003 F005

Etanol / Kerosene Naphtha
Chloroform Methylene chloride

D001 Phosphoric acid
D003 D002

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|-----------------|--|-----------|
| | SUBPART C: PRE-TRANSPORT REQUIREMENTS | |
| 722.130 | Is there any hazardous waste ready for transport off-site? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.130 |
| | If so, is the generator complying with the pre-transport requirements in Subpart C? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (722.134(a)) | Section 722.134 Accumulation Time Has the generator complied with the following requirements: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| (722.134(a)(1)) | A) For waste in containers, has the generator complied with the requirements of Part 725, Subpart I, AA, BB, and CC? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| | and/or B) For waste in tanks, has the generator complied with the requirements of Part 725, Subpart J, AA, BB, and CC (except Sections 725.297(c) and 725.300)? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | and/or C) For waste on drip pads, has the generator complied with the requirements of Part 725, Subpart W and maintained the required records identified in this subsection? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | and/or D) For waste in containment buildings, has the generator complied with Part 725, Subpart DD and maintained the required records identified in this subsection? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| (722.134(a)(2)) | For waste in containers, has the generator marked and made visible for inspection on each container, the date upon which accumulation began? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>  | |
| (722.134(a)(3)) | For waste in containers and tanks, has the generator marked or labeled each with the words "Hazardous Waste"? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| (722.134(a)(4)) | Has the generator complied with the requirements of Part 725, Subparts C and D, and Sections 725.116 and 728.107(a)(4)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| | Specifically, the requirements of items 1 and/or 4 above (listed by regulation) which need to be complied with are as follows: | |
| | Does the facility accumulate hazardous waste in containers? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| | If "No", go to Subpart J. | |
| | SUBPART I: USE AND MANAGEMENT OF CONTAINERS | |
| (725.211) | Has the generator closed an accumulation area? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | 725.211 |
| (725.214) | If "Yes", was the accumulation area closed in accordance with Sections 725.211 and 725.214? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 725.214 |
| (725.271) | If the containers have leaked or are in poor condition, has the owner/operator transferred the hazardous waste to a suitable container? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.272) | Is the waste compatible with the container and/or liner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.273(a)) | Are containers of hazardous waste always closed except to remove or add waste during accumulation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.273(b)) | Are containers of hazardous waste being opened, handled, or stored in a manner which will prevent the rupture of the container or prevent it from leaking? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|-----------|
| (725.274) | <p>Is the owner/operator inspecting the accumulation area(s) at least weekly, looking for leaks or deterioration? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Is the accumulation area free from any evidence of leaking or deteriorating containers? (See also Section 725.131) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.276) | <p>Are containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from the facility's property line? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: See Section 725.117(a) for additional requirements for ignitable, reactive or incompatible wastes.</p> | |
| (725.277) | <p>Is the owner/operator complying with the requirements concerning incompatible wastes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>COMMENTS:</p> | |
| (725.278) | <p>Section 725.278 Air Emission Standards</p> <p>Is the owner or operator managing all hazardous waste placed in containers in accordance with Subparts AA, BB and CC of Part 725? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Comments:</p> <p>Does the generator accumulate and/or treat hazardous waste in tanks? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: If "No", go to Subpart C.</p> <p>SUBPART J: TANK SYSTEMS</p> | |
| (725.211) | <p>Has the generator closed an accumulation area? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | 725.211 |
| (725.214) | <p>If "Yes", was the accumulation area closed in accordance with Sections 725.211 and 725.214? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | 725.214 |
| (725.290) | <p>Does the facility accumulate or treat hazardous waste in tanks? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: A generator may treat hazardous waste in a tank for less than 90 days without a RCRA permit.</p> <p>If "No", skip Subpart J.</p> <p>a) Tank systems that are used to accumulate or treat hazardous waste which contains no free liquids (using the Paint Filter Liquids Test) and that are situated inside a building with an impermeable floor are exempted from the requirements in Section 725.293.</p> <p>b) Tank systems, including sumps, that serve as part of a secondary containment system to collect or contain releases of hazardous wastes are exempted from the requirements in Section 725.293(a).</p> <p>c) Tanks, sumps and other collection devices used in conjunction with drip pads (as defined in Section 720.110) and regulated under Subpart W, must meet the requirements of this Subpart.</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|---|-----------|
| (725.291(a)) | For tanks existing prior to July 14, 1986 (see definition of tank system under 720.110) and not protected by a secondary containment system, has a written assessment been reviewed and certified by an IRPE(*) in accordance with Section 702.126(d) by January 12, 1988 [except as provided in Section 725.291(c)]? Yes _____ No _____ N/A _____ | |
| (725.291(b)) | Does this assessment consider at least the following: 1) design standards for the tank and ancillary equipment? Yes _____ No _____ N/A _____ 2) hazardous characteristics of the wastes? Yes _____ No _____ N/A _____ 3) existing corrosion protection measures? Yes _____ No _____ N/A _____ 4) documented age of the tank system? Yes _____ No _____ N/A _____ 5) results of a leak test, internal inspection, or other tank integrity examination? Yes _____ No _____ N/A _____ *IRPE = Independent Registered Professional Engineer | |
| (725.291(c)) | Has a tank system assessment been performed within 12 months after the materials in the tank become a hazardous waste? Yes _____ No _____ N/A _____ Note: If an assessment indicates a tank system is leaking or unfit for use, the owner/operator must comply with the requirements of Section 725.291(b)(5). | |
| (725.292(a)) | For new tanks (see definition of new tanks under Section 720.110) whose installation commenced after 07/14/86, has a written assessment been reviewed and certified by an IRPE in accordance with Section 702.126(d) prior to operation of the tank system? Yes _____ No _____ N/A _____ Does the assessment include, at a minimum, the following: 1) design standards for tanks and ancillary equipment? Yes _____ No _____ N/A _____ 2) hazardous characteristics of the waste(s) to be handled? Yes _____ No _____ N/A _____ 3) evaluation of potential for corrosion and corrosion protection measures for tank systems with metal components in contact with soil or water? Yes _____ No _____ N/A _____ 4) design or operational measures that will protect underground tank systems from potential damage resulting from vehicular traffic? Yes _____ No _____ N/A _____ 5) designs to ensure adequate foundations, anchoring to prevent flotation or dislodgment and the ability to withstand the effects of frost heave? Yes _____ No _____ N/A _____ | |
| (725.292(g)) | Has the owner/operator obtained and kept on file at the facility the written statements, including the certification statements [as required in Section 702.126(d)] of the design and installation requirements of Subsections (b) through (f)? Yes _____ No _____ N/A _____ | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|--|-----------|
| (725.293(a)) | <p>Is secondary containment provided for any new tank system before being put into service? Yes _____ No _____ N/A _____</p> <p>Does an existing tank, used to accumulate F020, F021, F022, F023, F026 or F027 waste(s), have secondary containment by 1/12/89? Yes _____ No _____ N/A _____</p> <p>For an existing tank of documentable age, is secondary containment provided by 1/12/89 or when the tank is 15 years old, whichever is later? Yes _____ No _____ N/A _____</p> <p>For an existing tank of undocumentable age, has secondary containment been provided by 1/12/95? Yes _____ No _____ N/A _____</p> <p>or if the facility is older than 7 years, by the time the facility reaches 15 years of age or 1/12/89, whichever is later? Yes _____ No _____ N/A _____</p> <p>For tanks that accumulate wastes that become hazardous after 1/12/87, has secondary containment been provided within the time intervals required in Subsections (a)(1) through (a)(4) substituting the date that a material becomes a hazardous waste for 1/12/87? Yes _____ No _____ N/A _____</p> | |
| (725.293(b)) | <p>Is the secondary containment system designed, installed and operated to prevent migration of wastes or accumulated liquid out of the system at any time? Yes _____ No _____ N/A _____</p> <p>Is the secondary containment system capable of detecting and collecting releases and accumulated liquids until the collected material is removed? Yes _____ No _____ N/A _____</p> | |
| (725.293(c)) | <p>To meet the requirements of Subsection (b), is the secondary containment system:</p> <ol style="list-style-type: none"> compatible with the waste(s) in the tank and of sufficient strength and thickness to prevent failure? Yes _____ No _____ N/A _____ placed on a foundation or base capable of providing support, providing resistance to pressure gradients and preventing failure due to settlement, compression or uplift? Yes _____ No _____ N/A _____ provided with a leak detection system designed and operated to detect any release or accumulated liquid within 24 hours? Yes _____ No _____ N/A _____ sloped or otherwise designed or operated to drain and remove liquids resulting from leaks, spills or precipitation? Yes _____ No _____ N/A _____ <p>and is spilled or leaked waste and accumulated precipitation removed from the secondary containment within 24 hours? Yes _____ No _____ N/A _____</p> <p>Note: A RCRA permit may allow for removal of liquids less frequently than 24 hours after accumulation.</p> | |
| (725.293(d)) | <p>Does the secondary containment for tanks have one or more of the following:</p> <ol style="list-style-type: none"> a liner (external to the tank); or a vault; or a double-walled tank; or an equivalent device (approved by the Board)? <p>Yes _____ No _____ N/A _____</p> | |
| (725.293(e)) | <p>Does the external liner system(s), vault system(s) and/or double-walled tank(s) meet the additional requirements identified in Section 725.293(e)? Yes _____ No _____ N/A _____</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|--|-----------|
| (725.293(f)) | <p>Is ancillary equipment protected by secondary containment that meets the requirement of Subsection (h) and (c)?</p> <p>Yes _____ No _____ N/A _____</p> <p>If "No":</p> <p>1) Is aboveground piping (exclusive of flanges, joints, valves and connections) inspected daily?</p> <p>Yes _____ No _____ N/A _____</p> <p>2) Are welded flanges, joints and connections inspected daily?</p> <p>Yes _____ No _____ N/A _____</p> <p>3) Are sealless or magnetic coupling pumps and sealless valves inspected daily?</p> <p>Yes _____ No _____ N/A _____</p> <p>4) Are pressurized aboveground piping systems with automatic shut-off devices inspected daily?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.293(i)) | <p>Until such time as secondary containment is provided, are the following requirements being met for all tank systems:</p> <p>1) For non-enterable underground tanks, has an annual leak test that meets the requirements of 725.291(b)(5) been conducted?</p> <p>Yes _____ No _____ N/A _____</p> <p>2) For other than non-enterable underground tanks and ancillary equipment, has an annual leak test, internal inspection or other tank integrity examination by an IRPE been conducted?</p> <p>Yes _____ No _____ N/A _____</p> <p>3) Are written records maintained at the facility to document the assessments required under Subsections (i)(1) and (i)(2)?</p> <p>Yes _____ No _____ N/A _____</p> <p>Note: If a tank system is found to be leaking or unfit for use as a result of a leak test or assessment, the owner/operator must comply with Section 725.296.</p> | |
| (725.294(a)) | <p>Has the owner/operator placed hazardous wastes or treatment reagents in the tank system that could cause the system to rupture, leak, corrode or otherwise fail?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.294(b)) | <p>Do tanks and secondary containment have appropriate controls and practices to prevent spills and overflows including:</p> <p>1) spill prevention controls?</p> <p>Yes _____ No _____ N/A _____</p> <p>2) overfill prevention controls?</p> <p>Yes _____ No _____ N/A _____</p> <p>3) sufficient freeboard in uncovered tanks?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.294(c)) | <p>Note: If a leak or spill has occurred in the tank system, the owner/operator shall comply with the requirements of Section 725.296.</p> | |
| (725.295(a)) | <p>Does the owner/operator inspect, if present, at least each operating day, the following:</p> <p>1) overfill/spill control equipment?</p> <p>Yes _____ No _____ N/A _____</p> <p>2) the aboveground portion of the tank system for corrosion or releases?</p> <p>Yes _____ No _____ N/A _____</p> <p>3) data from monitoring equipment?</p> <p>Yes _____ No _____ N/A _____</p> <p>4) the construction materials and the area immediately surrounding the external portion of the system?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.295(b)) | <p>If the tank system has cathodic protection, is the owner/operator complying with Section 725.295(b) to ensure that they are functioning properly?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.295(c)) | <p>Does the owner/operator document in the operating record, the results of tank inspections as required in Section 725.295(a) and (b)?</p> <p>Yes _____ No _____ N/A _____</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|--|-----------|
| (725.296) | <p>If the tank system or secondary containment system has a leak or spill or is unfit for use, has the owner/operator:</p> <p>a) immediately ceased using; prevented flow or addition of waste and inspected the system to determine the cause of the release? Yes _____ No _____ N/A _____</p> <p>b) removed applicable waste from the system within 24 hours of detection? Yes _____ No _____ N/A _____</p> <p>c) immediately conducted a visual inspection of the release and taken actions to contain visible releases to the environment, prevented further migration to soils or surface water and removed and properly disposed of any contaminated soil or water? Yes _____ No _____ N/A _____</p> | |
| (725.296(d)) | <p>d) notified the Agency within 24 hours of detection of release? Yes _____ No _____ N/A _____</p> <p>d)3) within 30 days of detection of release, submitted a report to the Agency that complies with the requirements of Section 725.296(d)(3)? Yes _____ No _____ N/A _____</p> <p>Note: Notification and reports are not necessary if less than 1 pound of material is spilled and it was immediately contained and cleaned up.</p> | |
| (725.296(e)) | <p>e) repaired the tank system prior to returning the tank system to service in the event that a leak has occurred from the primary tank system into the secondary containment system? Yes _____ No _____ N/A _____</p> <p>e)4) provided secondary containment before returning a tank system to service in the event that the release was from a component of a tank system without secondary containment? Yes _____ No _____ N/A _____</p> <p>e)4) met the requirements for a new tank system in the event that a component is replaced during repair? Yes _____ No _____ N/A _____</p> <p>e)4) provided the entire component with secondary containment prior to being returned to use in the event that a leak has occurred in any portion of a component that is not readily accessible for visual inspection? Yes _____ No _____ N/A _____</p> | |
| (725.296(f)) | <p>f) In the event that an extensive repair has been conducted in accordance with subsection (e), submitted to the Agency within 7 days after returning the tank system to use, a certification by an IRPE stating that the repaired system is capable of handling hazardous wastes without release for the intended life of the system? Yes _____ No _____ N/A _____</p> <p>Note: If the owner/operator does not satisfy the requirements of subsections (e)(2) through (e)(4), the tank system must be closed in accordance with Section 725.297.</p> | |
| (725.297(a)) | <p>At the time of closure of a tank system, has the owner/operator removed or decontaminated all waste residues, contaminated components, contaminated soils and structures and equipment and managed them as hazardous waste [unless Section 721.103(d) applies]? Yes _____ No _____ N/A _____</p> | |
| (725.297(a)) | <p>Have the closure plan, closure activities, cost estimates for closure and financial responsibility for tank systems met all requirements specified in Subparts G and H? Yes _____ No _____ N/A _____</p> | |
| (725.297(b)) | <p>If the tank system cannot be "clean" closed, has the owner/operator closed the tank system and performed post-closure care in accordance with the closure and post-closure care requirements that apply to landfills (Section 725.410)? Yes _____ No _____ N/A _____</p> <p>Note: Such a tank system is considered a landfill and must meet all of the requirements of landfills specified in Subparts G and H.</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|---|-----------|
| (725.298(a)) | <p>Are ignitable or reactive wastes placed in a tank system? Yes _____ No _____ N/A _____</p> <p>If "No", skip to Section 725.299.</p> <p>Is the waste treated, rendered or mixed before or immediately after placement in the tank system so that: - the resulting waste, mixture or dissolved material is no longer ignitable or reactive? Yes _____ No _____ N/A _____</p> <p>- Section 725.117(b) is complied with? Yes _____ No _____ N/A _____</p> <p>or</p> <p>Is the waste accumulated or treated so that it is protected from any material or conditions which may lead to ignition or reaction? Yes _____ No _____ N/A _____</p> <p>or</p> <p>Is the tank used solely for emergencies? Yes _____ No _____ N/A _____</p> | |
| (725.298(b)) | <p>Is the facility complying with the requirements regarding maintenance of protective distances between the waste management area and any public ways, streets, alleys or any adjoining property line? Yes _____ No _____ N/A _____</p> | |
| (725.299) | <p>Are incompatible wastes/materials placed in the same tank? Yes _____ No _____ N/A _____</p> <p>If "No", skip to Section 725.300.</p> <p>Is Section 725.117(b) being complied with? Yes _____ No _____ N/A _____</p> <p>Has the tank system been properly decontaminated if it previously held an incompatible waste/material unless Section 725.117(b) is complied with? Yes _____ No _____ N/A _____</p> <p>COMMENTS:</p> | |
| (725.302) | <p>Section 725.302 Air Emission Standards</p> <p>Is the owner or operator managing all hazardous waste placed in tanks in accordance with Subparts AA, BB and CC of Part 725? Yes _____ No _____ N/A _____</p> <p>Comments:</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|---|-----------|
| | SUBPART C: PREPAREDNESS AND PREVENTION | |
| (725.131) | Is the facility being operated and maintained to minimize the possibility of a fire, explosion or any release of hazardous waste or hazardous waste constituents which could threaten human health or the environment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.132) | Is the facility equipped with the following, if necessary: a) an internal communication or alarm system(s)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) a telephone or other device to summon emergency assistance from local authorities? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> c) portable fire extinguishers, fire control equipment, spill control equipment and decontamination equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> d) water at adequate volume and pressure for fire control? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 2 |
| (725.133) | Is the facility testing and maintaining communication/alarm system(s), fire protection equipment, spill control equipment and decontamination equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.134) | a) Where hazardous waste is being handled, do all employees have immediate access to an internal alarm or other emergency communication device? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) If there is ever just one employee on the premises when the facility is operating, does he/she have immediate access to a device capable of summoning external emergency assistance? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.135) | Is the facility maintaining adequate aisle space? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | 2 |
| (725.137) | Has the facility attempted to make the following arrangements, as appropriate, for the type of facility and waste: - arrangements with local emergency authorities (i.e. police and fire departments, other emergency response agencies) to familiarize them with the layout of the facility, properties of hazardous waste handled, places where facility personnel would be working, entrances to roads inside the facility and evacuation routes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - agreements designating the primary authority where more than one police or fire department might respond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - agreements with State emergency response teams, contractors and equipment suppliers? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the type of injuries or illnesses which could result from fires, explosions or releases at the facility? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| | SUBPART D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES | |
| (725.151(a)) | Is the contingency plan available? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If "No", skip to Section 725.155. Is the plan designed to protect human health and the environment from releases to the air, soil and water? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.151(b)) | Has there been a fire, explosion or release of hazardous waste? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> If "Yes", has the contingency plan been carried out immediately? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| (725.152(a)) | Does the plan describe the actions required for response to: - fires? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - explosions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - releases? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|---|-----------|
| (725.152(c)) | <p>Does the plan describe arrangements with:</p> <ul style="list-style-type: none"> - police and fire departments? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - hospitals? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - contractors? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - emergency response teams? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.152(d)) | <p>Does the plan contain the current emergency coordinator's name, phone (office and home) and address?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.152(e)) | <p>Does the plan identify all emergency equipment including:</p> <ul style="list-style-type: none"> - description? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - capability? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - location? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> <p>Is the list of emergency equipment up-to-date?</p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.152(f)) | <p>Does the plan include:</p> <ul style="list-style-type: none"> - an evacuation plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - an evacuation signal? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - alternate evacuation routes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.153) | <p>Has the contingency plan (including all revisions) been:</p> <ul style="list-style-type: none"> a) maintained at the facility? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) submitted to: <ul style="list-style-type: none"> - police department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - fire department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - hospital? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - emergency response teams? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.154) | <p>Has the contingency plan been reviewed and revised whenever:</p> <ul style="list-style-type: none"> a) regulations are revised? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) the plan fails in an emergency? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> c) the facility changes in a way that modifies the emergency response necessary? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> d) information regarding emergency coordinators changes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> e) information regarding equipment changes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.155) | <p>Is the emergency coordinator on-site or on call at all times? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Is the emergency coordinator familiar with all facility activities, wastes, records, layout and contingency plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Does the emergency coordinator have the authority to commit the resources needed to carry out the actions specified in the contingency plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.156) | <p>If the facility has had a release, fire or explosion, have the procedures of this Section been followed regarding assessment, response and reporting? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/></p> | |
| | <p>Note: If the facility has had a release, explain in detail.</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|--------------|---|-----------|
| (725.116(a)) | <p>Section 725.116 Personnel Training</p> <p>Does the facility have a training program? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Have facility personnel successfully completed a program of classroom or on-the-job training that teaches them to perform their duties in a way that ensures the facility's compliance with the requirements of Part 725? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Is the program directed by a person trained in hazardous waste management procedures? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Does the program teach facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to the positions in which they are employed? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Does the program cover, at a minimum:</p> <ul style="list-style-type: none"> procedures to familiarize facility personnel with emergency procedures, emergency equipment and emergency systems? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> procedures for using, inspecting, repairing and replacing facility emergency and monitoring equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> key parameters for automatic waste feed cut-off systems? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> communications or alarm systems? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> response to fire or explosions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> response to groundwater contamination incidents? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> shutdown of operations? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.116(b)) | <p>Have new employees completed the program within 6 months of the date of employment or assignment to a position requiring them to manage hazardous waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.116(c)) | <p>Have facility personnel received an annual review of the initial training? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.116(d)) | <p>Are the following documents and records being maintained at the facility:</p> <ol style="list-style-type: none"> the job title for each position related to hazardous waste management and the name(s) of the employee(s) filling each job? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> a written job description for each position above, including the requisite skill, education or other qualifications and duties of personnel assigned to each position? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> a written description of the type and amount of both initial and continuing training that will be given to each person filling a position dealing with hazardous waste management? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> records documenting that the training or job experience has been given to and completed by facility personnel? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.116(e)) | <p>Is the facility maintaining training records until closure of the facility and those of former employees for at least 3 years from the last date of employment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |

Louis S. Oct. 2006 Cert.
Donovan Rolun June 2007

On-line Training

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|-----------------|--|--|
| (728.107(a)(5)) | Section 728.107 Waste Analysis and Recordkeeping Has the generator who treats a prohibited waste in tanks or containers in order to meet the treatment standards developed and followed a waste analysis plan? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Is the plan on-site? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Does the plan include a detailed physical and chemical analysis? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Has the plan been filed with the Agency at least 30 days prior to commencement of treatment activity? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Has the generator submitted the required notification and certification that the waste meets treatment standards when the waste is shipped off-site? Yes _____ No <input checked="" type="checkbox"/> N/A _____ | <div style="border: 1px solid black; border-radius: 50%; padding: 10px; transform: rotate(-15deg); display: inline-block;"> missing one LDR </div> |
| 722.134(c) | Section 722.134 Satellite Accumulation Is the generator who accumulates hazardous waste at or near any point of generation where wastes initially accumulate and which is under the control of the operator of the process generating the waste, limiting such accumulation to 55 gallons of hazardous waste or 1 quart of acutely hazardous waste, complying with Sections 725.271, 725.272 and 725.273(a), and marking the containers with the words "Hazardous Waste" or other words identifying the contents? Yes <input checked="" type="checkbox"/> No _____ N/A _____ Has the generator who accumulates more than 55 gallons of hazardous waste or 1 quart of acutely hazardous waste complied with the requirements of Section 722.134(a) within 3 working days? Yes _____ No _____ N/A <input checked="" type="checkbox"/> If there are more than 55 gallons of hazardous waste or 1 quart of acutely hazardous waste in the satellite accumulation area, are the containers marked with the date accumulation began? Yes _____ No _____ N/A <input checked="" type="checkbox"/> During the 3 day period, is the generator continuing to comply with the requirements of Section 722.134(c)(1) with respect to the excess waste? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | |
| 722.134(g) | Note: A generator that generates 1,000 kilograms or greater of hazardous waste per calendar month which also generates wastewater treatment sludges from electroplating operations that meet the listing description for the hazardous waste code F006 may have alternate accumulation requirements if the conditions of 722.134(g), (h), or (i) are fulfilled. | |
| | SUBPART D: RECORDKEEPING AND REPORTING | |
| 722.140(a) | Section 722.140 Recordkeeping Has the generator retained for a period of 3 years: - a copy of each signed manifest? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | |
| 722.140(b) ★ | Has the generator retained a copy of each Annual Report and Exception Report for a period of at least three years from the due date of the report (March 1)? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.140(b) |
| 722.140(c) | Has the generator retained for a period of 3 years: - copies of test results, waste analyses or other determinations made in accordance with Section 722.111? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.140(c) |
| 722.140(d) | Does a generator who is involved in any unresolved enforcement action or as requested by the Director continue to maintain the records required in subsections a) and c)? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | 722.140(d) |
| 722.141(a) | Section 722.141 Annual Reporting Has the generator who ships hazardous waste off-site for treatment, storage or disposal filed an annual report with the Agency by March 1 for the preceding calendar year? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.141(a) |
| | Note: If "No", or if deficiencies are noted with the annual report reviewed, contact the Planning and Reporting Section. | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|---------------|---|---------------|
| 722.141(b) | Has the generator who treats, stores or disposes of hazardous waste on-site, filed an annual report with the Agency by March 1 for the preceding calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| | Section 722.142 Exception Reporting | 722.141(b) |
| 722.142(a)(1) | If the generator has not received a copy of the manifest from the TSD facility within 35 days of the date of delivery to the transporter, has the generator contacted the transporter or the TSD facility to determine the status of the hazardous waste? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| 722.142(a)(2) | If the generator has not received a copy of the signed manifest within 45 days of the date of delivery to the transporter, has he filed an exception report with the Agency in accordance with the requirements of this Section? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 722.142(a)(1) |
| | Section 722.143 Additional Reporting | 722.142(a)(2) |
| 722.143 | Has the generator furnished additional reports as required by the Director? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | SUBPART E: EXPORTS OF HAZARDOUS WASTE | 722.143 |
| 722.150 | Is the generator an exporter of hazardous waste? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If "Yes", has the generator complied with the requirements of Subpart E? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | SUBPART F: IMPORTS OF HAZARDOUS WASTE | 722.150 |
| 722.160 | Is the generator an importer of hazardous waste? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If "Yes", has the generator complied with the requirements of Subpart F? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | SUBPART G: FARMERS | 722.160 |
| 722.170 | Is the generator a farmer? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If "Yes", has the generator complied with the requirements of Subpart G? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| | COMMENTS: | 722.170 |
| | | |

U.S. Postal Service
CERTIFIED MAIL RECEIPT DE-9T
 (Domestic Mail Only; No Insurance Coverage Provided)

U.S. EPA Admin. Diane Sharkey
 77 W. Jackson Blvd, Chgo, IL 60604

| | |
|---|----------------|
| Postage | \$ 1.06 |
| Certified Fee | 2.30 |
| Return Receipt Fee (Endorsement Required) | 1.75 |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees | \$ 5.11 |



Sent To
 David L. Van Lowen
 Street, Apt. No.,
 or PO Box No. 3938 Pore.; Dave
 City, State, ZIP+4
 Gurnee, IL 60031

PS Form 3800, January 2001

See Reverse for Instructions

7001 0320 0006 0201 5647



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

REPLY TO THE ATTENTION OF

JUN 10 2003

DE-9J

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

David L. Van Lewen, CIH
Manager, Safety and Ecology
BASF Corporation
3938 Porett Drive
Gurnee, Illinois 60031

Re: Compliance Evaluation Inspection
EPA I.D. No.: ILD 055 413 371

Dear Mr. Van Lewen:

On June 3, 2003, a representative of the United States Environmental Protection Agency (U.S. EPA) inspected BASF Corporation (BASF), located in Gurnee, Illinois. The purpose of the inspection was to evaluate BASF's compliance with the Standards Applicable to Generators of Hazardous Waste, Standards for Land Disposal Restrictions, and Management of Used Oil set forth at 35 Illinois Administrative Code (IAC), Title 35: Environmental Protection, Subtitle G: Waste Disposal, Chapter I: Pollution Control Board, and Title 40 of Code of Federal Regulations (40 CFR) Parts 262, 268 and 279, respectively. Enclosed please find a copy of our inspection report.

Our review of the June 3, 2003, inspection has not resulted in the detection of violations of any of the specific RCRA requirements under evaluation. This determination does not limit the applicability of the requirements evaluated, other RCRA regulations, or regulations under other environmental statutes. U.S. EPA and the Illinois Environmental Protection Agency (Illinois EPA) will continue to evaluate your facility in the future.

According to Section 3008(a) of the Resource Conservation and Recovery Act (RCRA), U.S. EPA may issue an order assessing a civil penalty for any past or current violation requiring compliance immediately or within a specified time period.

Although this letter is not such an order, we request that you review the enclosed inspection report and ensure that the information provided to the inspector is correct. If you find any errors in the inspection report, please contact Diane Sharrow at the United States Environmental Protection Agency, Region 5, 77 West Jackson Boulevard, DE-9J, Chicago, Illinois 60604.

If you have any questions regarding this matter, feel free to contact Ms. Sharrow, of my staff, at (312) 886-6199.

Sincerely,

Robert Dean Smith, L.P.G.

for Lorna M. Jereza, P.E., Chief
Compliance Section 1
Enforcement and Compliance Assurance Branch
Waste, Pesticides and Toxics Division

Enclosure

cc: Todd Marvel, Illinois EPA

U.S. EPA REGION 5
WASTE, PESTICIDES AND TOXICS DIVISION
ENFORCEMENT AND COMPLIANCE ASSURANCE BRANCH

COMPLIANCE EVALUATION INSPECTION REPORT

FACILITY NAME: BASF Corporation

FACILITY U.S. EPA ID NO.: ILD 055 413 371

FACILITY TYPE: Large Quantity Generator

FACILITY ADDRESS: 3938 Porett Drive
Gurnee, Illinois 60031

FACILITY REPRESENTATIVE: David L. Van Lewen, CIH
Manager
Safety and Ecology
(847)249-6360
(847)249-6935 Facsimile
Vanlewd@basf.com

U.S. EPA REPRESENTATIVE: Diane M. Sharrow
Environmental Scientist
DE-9J
Compliance Section 1
(312) 886-6199
(312) 353-4342 Facsimile
Sharrow.Diane@epa.gov

DATE OF INSPECTION: June 3, 2003

NAIC (SIC) CODE: 2843

INSPECTION PRIORITY,
SECTOR, AND/OR PROCESS: ----

PBTs¹: ----

INTRODUCTION:

The purpose of the inspection was to conduct a Compliance Evaluation Inspection (CEI) at the facility for management of its RCRA regulated waste. The purpose of this report is to document the CEI and the facility's compliance status. The USEPA OECA

¹ Persistent, bioaccumulative and toxic (PBT) chemicals - see www.epa.gov/wastemin.

Small Business Information Sheet was mailed to the facility on June 9, 2003.

BASF Corporation (BASF) is located on 15 acres in Gurnee, Illinois. BASF purchased the facility in approximately 1997 from PPG. BASF produces surfactants at this location. Hazardous waste generated by BASF includes D001, D002, D022, F002, F005 and

Upon my arrival at BASF, I was introduced to David Van Lewen. I presented my Enforcement Officer credentials to Mr. Van Lewen and informed him that I wished to conduct an unannounced hazardous waste inspection. I began the inspection with a record review. I then conducted a site inspection.

BASF has three satellite accumulation areas and 1 outdoor "less than 90 day" storage area.

FINDINGS:

As a result of my inspection, I determined that BASF was not violating any hazardous waste requirements.


PHOTOGRAPH LOG: No photographs were taken.

ATTACHMENTS: (2)

Inspection Checklist(s)
Information from BASF

cc: Todd Marvel, Illinois EPA

Workforce Development Board Training Course Nomination

For definitions of form terms, click here 

Record Information

Created: 06/09/2003

Author: Betty White/R5/USEPA/US

Last Modified: 06/09/2003

Year: 2004

Nominator Information

Nominator Name: Betty White
Constituent Group:

Nominator Phone: 6-7955

Course Information

| | |
|--|--|
| Course Title: Travel Manager Training | Course Category: Task/Technical/Information Technology |
| Course Description: To provide basic training on the electronic Travel Manager | |
| Course Goal/Results: Ensure travelers are knowledgeable and can prepare travel authorizations and travel vouchers in the Travel Manager system | |
| Target Audience: All Regional Employees | |
| Course Justification: | |
| Suggested Vendor and Phone #: | Class Length (Days): |
| # of Staff Trained in 2002: | # of Staff to be Trained in 2003: 0 |
| Estimate of Average Class Size: 20 | Total Classes Required: 0.00 <==automatically calculated |
| Vendor Cost Per Class: \$0.00 | Average Cost Per Student: \$0.00 <==automatically calculated |

Comments & Attachments

Comments:
Attachments:

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|------------|
| | PART 722: STANDARDS APPLICABLE TO GENERATORS OF HAZARDOUS WASTE (>1000 KG/MO.) | |
| | SUBPART A: GENERAL | |
| 722.111 | Section 722.111 Hazardous Waste Determination Has the generator correctly determined if the solid waste(s) it generates is a hazardous waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.111 |
| | Have hazardous wastes been identified for purposes of compliance with Part 728? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 808.121(a) | Has the generator correctly determined if the solid waste(s) it generates is a special waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 808.121(a) |
| 722.112(a) | Section 722.112 USEPA Identification Numbers Has the generator obtained a USEPA identification number? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.112(a) |
| 722.112(c) | Has the generator offered its hazardous waste only to transporters or to treatment, storage or disposal facilities that have a USEPA identification number? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.112(c) |
| | SUBPART B: THE MANIFEST | |
| 722.120(a) | Section 722.120 General Requirements Does the facility manifest its waste off-site? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.120(a) |
| 722.120(b) | Does the manifest designate a facility permitted to handle the waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.120(b) |
| 120(d) | Has the generator shipped any waste that could not be delivered to the designated facility? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | 722.120(d) |
| | Section 722.121 Acquisition of Manifests | |
| 722.121(a) | Has the generator used: - an Illinois manifest for wastes designated to a facility within Illinois? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 722.121(a) |
| 722.121(b) | - a manifest from the State to which the manifest is designated? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - an Illinois manifest if the State to which the waste is designated has no manifest of its own? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 722.121(b) |
| 722.122 | Section 722.122 Number of Copies Does the manifest consist of at least 6 copies? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.122 |
| 722.123(a) | Section 722.123 Use of the Manifest For each manifest reviewed, has the generator: - signed the certificate by hand? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.123(a) |
| | - obtained the handwritten signature and the date of acceptance by the initial transporter? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 722.123(b) | - retained one copy as required by Section 722.140(a)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - apparently sent a copy (part 5 for the Illinois manifest) to the Agency within 2 working days? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.123(b) |
| 722.123(c) | - has the generator apparently given the remaining copies to the transporter? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - has the generator followed the procedures prescribed in Section 722.123 for manifesting bulk shipments of hazardous waste by rail or water? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | 722.123(c) |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------------------|---|------------|
| | SUBPART C: PRE-TRANSPORT REQUIREMENTS Is there any hazardous waste ready for transport off-site? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If so, is the generator complying with the pre-transport requirements in Subpart C? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 722.134(a) | Section 722.134 Accumulation Time Has the generator complied with the following requirements: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | 722.134(a) |
| 722.134(a)(1) | A) For waste in containers, has the generator complied with the requirements of Part 725, Subpart I? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> and/or B) For waste in tanks, has the generator complied with the requirements of Part 725, Subpart J (except Sections 725.297(c) and 725.300)? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> and/or C) For waste on drip pads, has the generator complied with the requirements of Part 725, Subpart W and maintained the required records identified in this subsection? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> and/or D) For waste in containment buildings, has the generator complied with Part 725, Subpart DD and maintained the required records identified in this subsection? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| 722.134(a)(2) | For waste in containers, has the generator marked and made visible for inspection on each container, the date upon which accumulation began? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 722.134(a)(3) | For waste in containers and tanks, has the generator marked or labeled each with the words "Hazardous Waste"? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| 722.134(a)(4) | Has the generator complied with the requirements of Part 725, Subparts C and D, and Sections 725.116 and 728.107(a)(4)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| | Specifically, the requirements of items 1 and/or 4 above (listed by regulation) which need to be complied with are as follows: Does the facility accumulate hazardous waste in containers? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If "No", go to Subpart J. | |
| | SUBPART I: USE AND MANAGEMENT OF CONTAINERS Has the generator closed an accumulation area? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.211) (725.214) | If "Yes", was the accumulation area closed in accordance with Sections 725.211 and 725.214? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| (725.271) | If the containers have leaked or are in poor condition, has the owner/operator transferred the hazardous waste to a suitable container? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| (725.272) | Is the waste compatible with the container and/or liner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.273a) | Are containers of hazardous waste always closed except to remove or add waste during accumulation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.273b) | Are containers of hazardous waste being opened, handled, or stored in a manner which will prevent the rupture of the container or prevent it from leaking? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------------------|---|-----------|
| (725.274) | <p>Is the owner/operator inspecting the accumulation area(s) at least weekly, looking for leaks or deterioration? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Is the accumulation area free from any evidence of leaking or deteriorating containers? (See also Section 725.131) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.276) | <p>Are containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from the facility's property line? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: See Section 725.117(a) for additional requirements for ignitable, reactive or incompatible wastes.</p> | |
| (725.277) | <p>Is the owner/operator complying with the requirements concerning incompatible wastes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>COMMENTS:</p> | |
| | <p>Does the generator accumulate and/or treat hazardous waste in tanks? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: If "No", go to Subpart C.</p> <p>SUBPART J: TANK SYSTEMS</p> <p>Has the generator closed an accumulation area? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.211) (725.214) | <p>If "Yes", was the accumulation area closed in accordance with Sections 725.211 and 725.214? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| 290) | <p>Does the facility accumulate or treat hazardous waste in tanks? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Note: A generator may treat hazardous waste in a tank for less than 90 days without a RCRA permit.</p> <p>If "No", skip Subpart J.</p> <p>a) Tank systems that are used to accumulate or treat hazardous waste which contains no free liquids (using the Paint Filter Liquids Test) and that are situated inside a building with an impermeable floor are exempted from the requirements in Section 725.293.</p> <p>b) Tank systems, including sumps, that serve as part of a secondary containment system to collect or contain releases of hazardous wastes are exempted from the requirements in Section 725.293(a).</p> <p>c) Tanks, sumps and other collection devices used in conjunction with drip pads (as defined in Section 720.110) and regulated under Subpart W, must meet the requirements of this Subpart.</p> | |
| (725.291a) | <p>For tanks existing prior to July 14, 1986 (see definition of tank system under 720.110) and not protected by a secondary containment system, has a written assessment been reviewed and certified by an IRPE(*) in accordance with Section 702.126(d) by January 12, 1988 [except as provided in Section 725.291(c)]? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.291b) | <p>Does this assessment consider at least the following:</p> <p>1) design standards for the tank and ancillary equipment? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>2) hazardous characteristics of the wastes? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>3) existing corrosion protection measures? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>4) documented age of the tank system? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>5) results of a leak test, internal inspection, or other tank integrity examination? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| | <p>*IRPE = Independent Registered Professional Engineer</p> | |

no long-term waste tanks

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|--|-----------|
| (725.291c) | <p>Has a tank system assessment been performed within 12 months after the materials in the tank become a hazardous waste?</p> <p>Yes _____ No _____ N/A _____</p> <p>Note: If an assessment indicates a tank system is leaking or unfit for use, the owner/operator must comply with the requirements of Section 725.291(b)(5).</p> | |
| (725.292a) | <p>For new tanks (see definition of new tanks under Section 720.110) whose installation commenced after 07/14/86, has a written assessment been reviewed and certified by an IRPE in accordance with Section 702.126(d) prior to operation of the tank system?</p> <p>Yes _____ No _____ N/A _____</p> <p>Does the assessment include, at a minimum, the following:</p> <ol style="list-style-type: none"> 1) design standards for tanks and ancillary equipment? Yes _____ No _____ N/A _____ 2) hazardous characteristics of the waste(s) to be handled? Yes _____ No _____ N/A _____ 3) evaluation of potential for corrosion and corrosion protection measures for tank systems with metal components in contact with soil or water? Yes _____ No _____ N/A _____ 4) design or operational measures that will protect underground tank systems from potential damage resulting from vehicular traffic? Yes _____ No _____ N/A _____ 5) designs to ensure adequate foundations, anchoring to prevent flotation or dislodgment and the ability to withstand the effects of frost heave? Yes _____ No _____ N/A _____ | |
| (725.292g) | <p>Has the owner/operator obtained and kept on file at the facility the written statements, including the certification statements [as required in Section 702.126(d)] of the design and installation requirements of Subsections (b) through (f)?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.293a) | <p>Is secondary containment provided for any new tank system before being put into service?</p> <p>Yes _____ No _____ N/A _____</p> <p>Does an existing tank, used to accumulate F020, F021, F022, F023, F026 or F027 waste(s), have secondary containment by 1/12/89?</p> <p>Yes _____ No _____ N/A _____</p> <p>For an existing tank of documentable age, is secondary containment provided by 1/12/89 or when the tank is 15 years old, whichever is later?</p> <p>Yes _____ No _____ N/A _____</p> <p>For an existing tank of undocumentable age, has secondary containment been provided by 1/12/95?</p> <p>Yes _____ No _____ N/A _____</p> <p>or</p> <p>if the facility is older than 7 years, by the time the facility reaches 15 years of age or 1/12/89, whichever is later?</p> <p>Yes _____ No _____ N/A _____</p> <p>For tanks that accumulate wastes that become hazardous after 1/12/87, has secondary containment been provided within the time intervals required in Subsections (a)(1) through (a)(4) substituting the date that a material becomes a hazardous waste for 1/12/87?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.293b) | <p>Is the secondary containment system designed, installed and operated to prevent migration of wastes or accumulated liquid out of the system at any time?</p> <p>Yes _____ No _____ N/A _____</p> <p>Is the secondary containment system capable of detecting and collecting releases and accumulated liquids until the collected material is removed?</p> <p>Yes _____ No _____ N/A _____</p> | |

no haz waste tanks

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|---------------------------------|
| (725.293c) | <p>To meet the requirements of Subsection (b), is the secondary containment system:</p> <p>1) compatible with the waste(s) in the tank and of sufficient strength and thickness to prevent failure? Yes _____ No _____ N/A _____</p> <p>2) placed on a foundation or base capable of providing support, providing resistance to pressure gradients and preventing failure due to settlement, compression or uplift? Yes _____ No _____ N/A _____</p> <p>3) provided with a leak detection system designed and operated to detect any release or accumulated liquid within 24 hours? Yes _____ No _____ N/A _____</p> <p>4) sloped or otherwise designed or operated to drain and remove liquids resulting from leaks, spills or precipitation? Yes _____ No _____ N/A _____</p> <p>and is spilled or leaked waste and accumulated precipitation removed from the secondary containment within 24 hours? Yes _____ No _____ N/A _____</p> <p>Note: A RCRA permit may allow for removal of liquids less frequently than 24 hours after accumulation.</p> | |
| (725.293d) | <p>Does the secondary containment for tanks have one or more of the following:</p> <p>1) a liner (external to the tank); or 2) a vault; or 3) a double-walled tank; or 4) an equivalent device (approved by the Board)? Yes _____ No _____ N/A _____</p> | |
| (725.293e) | <p>Does the external liner system(s), vault system(s) and/or double-walled tank(s) meet the additional requirements identified in Section 725.293(e)? Yes _____ No _____ N/A _____</p> | <i>no hazardous waste tanks</i> |
| (725.293f) | <p>Is ancillary equipment protected by secondary containment that meets the requirement of Subsection (h) and (c)? Yes _____ No _____ N/A _____</p> <p>If "No":</p> <p>1) Is aboveground piping (exclusive of flanges, joints, valves and connections) inspected daily? Yes _____ No _____ N/A _____</p> <p>2) Are welded flanges, joints and connections inspected daily? Yes _____ No _____ N/A _____</p> <p>3) Are sealless or magnetic coupling pumps and sealless valves inspected daily? Yes _____ No _____ N/A _____</p> <p>4) Are pressurized aboveground piping systems with automatic shut-off devices inspected daily? Yes _____ No _____ N/A _____</p> | |
| (725.293i) | <p>Until such time as secondary containment is provided, are the following requirements being met for all tank systems:</p> <p>1) For non-enterable underground tanks, has an annual leak test that meets the requirements of 725.291(b)(5) been conducted? Yes _____ No _____ N/A _____</p> <p>2) For other than non-enterable underground tanks and ancillary equipment, has an annual leak test, internal inspection or other tank integrity examination by an IRPE been conducted? Yes _____ No _____ N/A _____</p> <p>3) Are written records maintained at the facility to document the assessments required under Subsections (i)(1) and (i)(2)? Yes _____ No _____ N/A _____</p> <p>Note: If a tank system is found to be leaking or unfit for use as a result of a leak test or assessment, the owner/operator must comply with Section 725.296.</p> | |
| (725.294a) | <p>Has the owner/operator placed hazardous wastes or treatment reagents in the tank system that could cause the system to rupture, leak, corrode or otherwise fail? Yes _____ No _____ N/A _____</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|--|------------------------------------|
| (725.294b) | <p>Do tanks and secondary containment have appropriate controls and practices to prevent spills and overflows including:</p> <p>1) spill prevention controls? Yes _____ No _____ N/A _____</p> <p>2) overfill prevention controls? Yes _____ No _____ N/A _____</p> <p>3) sufficient freeboard in uncovered tanks? Yes _____ No _____ N/A _____</p> | |
| (725.294c) | <p>Note: If a leak or spill has occurred in the tank system, the owner/operator shall comply with the requirements of Section 725.296.</p> | |
| (725.295a) | <p>Does the owner/operator inspect, if present, at least each operating day, the following:</p> <p>1) overfill/spill control equipment? Yes _____ No _____ N/A _____</p> <p>2) the aboveground portion of the tank system for corrosion or releases? Yes _____ No _____ N/A _____</p> <p>3) data from monitoring equipment? Yes _____ No _____ N/A _____</p> <p>4) the construction materials and the area immediately surrounding the external portion of the system? Yes _____ No _____ N/A _____</p> | |
| (725.295b) | <p>If the tank system has cathodic protection, is the owner/operator complying with Section 725.295(b) to ensure that they are functioning properly? Yes _____ No _____ N/A _____</p> | |
| (725.295c) | <p>Does the owner/operator document in the operating record, the results of tank inspections as required in Section 725.295(a) and (b)? Yes _____ No _____ N/A _____</p> | |
| (725.296) | <p>If the tank system or secondary containment system has a leak or spill or is unfit for use, has the owner/operator:</p> <p>a) immediately ceased using; prevented flow or addition of waste and inspected the system to determine the cause of the release? Yes _____ No _____ N/A _____</p> <p>b) removed applicable waste from the system within 24 hours of detection? Yes _____ No _____ N/A _____</p> <p>c) immediately conducted a visual inspection of the release and taken actions to contain visible releases to the environment, prevented further migration to soils or surface water and removed and properly disposed of any contaminated soil or water? Yes _____ No _____ N/A _____</p> | <p><i>No. have waste tanks</i></p> |
| (725.296d) | <p>d) notified the Agency within 24 hours of detection of release? Yes _____ No _____ N/A _____</p> <p>d)3) within 30 days of detection of release, submitted a report to the Agency that complies with the requirements of Section 725.296(d)(3)? Yes _____ No _____ N/A _____</p> <p>Note: Notification and reports are not necessary if less than 1 pound of material is spilled and it was immediately contained and cleaned up.</p> | |
| (725.296e) | <p>e) repaired the tank system prior to returning the tank system to service in the event that a leak has occurred from the primary tank system into the secondary containment system? Yes _____ No _____ N/A _____</p> <p>e)4) provided secondary containment before returning a tank system to service in the event that the release was from a component of a tank system without secondary containment? Yes _____ No _____ N/A _____</p> <p>e)5) met the requirements for a new tank system in the event that a component is replaced during repair? Yes _____ No _____ N/A _____</p> <p>e)4) provided the entire component with secondary containment prior to being returned to use in the event that a leak has occurred in any portion of a component that is not readily accessible for visual inspection? Yes _____ No _____ N/A _____</p> | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|----------------------------------|
| (725.296f) | <p>f) In the event that an extensive repair has been conducted in accordance with subsection (e), submitted to the Agency within 7 days after returning the tank system to use, a certification by an IRPE stating that the repaired system is capable of handling hazardous wastes without release for the intended life of the system?</p> <p>Yes _____ No _____ N/A _____</p> <p>Note: If the owner/operator does not satisfy the requirements of subsections (e)(2) through (e)(4), the tank system must be closed in accordance with Section 725.297.</p> | |
| (725.297a) | <p>At the time of closure of a tank system, has the owner/operator removed or decontaminated all waste residues, contaminated components, contaminated soils and structures and equipment and managed them as hazardous waste [unless Section 721.103(d) applies]?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.297a) | <p>Have the closure plan, closure activities, cost estimates for closure and financial responsibility for tank systems met all requirements specified in Subparts G and H?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.297b) | <p>If the tank system cannot be "clean" closed, has the owner/operator closed the tank system and performed post-closure care in accordance with the closure and post-closure care requirements that apply to landfills (Section 725.410)?</p> <p>Yes _____ No _____ N/A _____</p> <p>Note: Such a tank system is considered a landfill and must meet all of the requirements of landfills specified in Subparts G and H.</p> | |
| (725.298a) | <p>Are ignitable or reactive wastes placed in a tank system?</p> <p>Yes _____ No _____ N/A _____</p> <p>If "No", skip to Section 725.299.</p> <p>Is the waste treated, rendered or mixed before or immediately after placement in the tank system so that:</p> <ul style="list-style-type: none"> the resulting waste, mixture or dissolved material is no longer ignitable or reactive? <p>Yes _____ No _____ N/A _____</p> <ul style="list-style-type: none"> Section 725.117(b) is complied with? <p>Yes _____ No _____ N/A _____</p> <p>or</p> <p>Is the waste accumulated or treated so that it is protected from any material or conditions which may lead to ignition or reaction?</p> <p>Yes _____ No _____ N/A _____</p> <p>or</p> <p>Is the tank used solely for emergencies?</p> <p>Yes _____ No _____ N/A _____</p> | <p><i>no haz waste tanks</i></p> |
| (725.298b) | <p>Is the facility complying with the requirements regarding maintenance of protective distances between the waste management area and any public ways, streets, alleys or any adjoining property line?</p> <p>Yes _____ No _____ N/A _____</p> | |
| (725.299) | <p>Are incompatible wastes/materials placed in the same tank?</p> <p>Yes _____ No _____ N/A _____</p> <p>If "No", skip to Section 725.300.</p> <p>Is Section 725.117(b) being complied with?</p> <p>Yes _____ No _____ N/A _____</p> <p>Has the tank system been properly decontaminated if it previously held an incompatible waste/ material unless Section 725.117(b) is complied with?</p> <p>Yes _____ No _____ N/A _____</p> <p>COMMENTS:</p> | |
| | | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|---|
| | SUBPART C: PREPAREDNESS AND PREVENTION | |
| (725.131) | Is the facility being operated and maintained to minimize the possibility of a fire, explosion or any release of hazardous waste or hazardous waste constituents which could threaten human health or the environment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.132) | Is the facility equipped with the following, if necessary: a) an internal communication or alarm system(s)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) a telephone or other device to summon emergency assistance from local authorities? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> c) portable fire extinguishers, fire control equipment, spill control equipment and decontamination equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> d) water at adequate volume and pressure for fire control? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | outdoor storage of hazardous waste containers |
| (725.133) | Is the facility testing and maintaining communication/alarm system(s), fire protection equipment, spill control equipment and decontamination equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.134) | a) Where hazardous waste is being handled, do all employees have immediate access to an internal alarm or other emergency communication device? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) If there is ever just one employee on the premises when the facility is operating, does he/she have immediate access to a device capable of summoning external emergency assistance? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.135) | Is the facility maintaining adequate aisle space? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.137) | Has the facility attempted to make the following arrangements, as appropriate, for the type of facility and waste: - arrangements with local emergency authorities (i.e. police and fire departments, other emergency response agencies) to familiarize them with the layout of the facility, properties of hazardous waste handled, places where facility personnel would be working, entrances to roads inside the facility and evacuation routes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - agreements designating the primary authority where more than one police or fire department might respond? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - agreements with State emergency response teams, contractors and equipment suppliers? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - arrangements to familiarize local hospitals with the properties of hazardous waste handled at the facility and the type of injuries or illnesses which could result from fires, explosions or releases at the facility? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | no hazardous waste tanks |
| | SUBPART D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES | |
| (725.151a) | Is the contingency plan available? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If "No", skip to Section 725.155. Is the plan designed to protect human health and the environment from releases to the air, soil and water? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.151b) | Has there been a fire, explosion or release of hazardous waste? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/> If "Yes", has the contingency plan been carried out immediately? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | |
| (725.152a) | Does the plan describe the actions required for response to: - fires? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - explosions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - releases? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | MS |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | | | | Violation |
|--|--|--|--|--|---|
| (725.152c) | Does the plan describe arrangements with: - police and fire departments? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - hospitals? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - contractors? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - emergency response teams? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | <i>Both</i> |
| (725.152d) | Does the plan contain the current emergency coordinator's name, phone (office and home) and address? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | |
| (725.152e) | Does the plan identify all emergency equipment including: - description? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - capability? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - location? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Is the list of emergency equipment up-to-date? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | |
| (725.152f) | Does the plan include: - an evacuation plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - an evacuation signal? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - alternate evacuation routes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | |
| (725.153) | Has the contingency plan (including all revisions) been: a) maintained at the facility? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) submitted to: - police department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - fire department? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - hospital? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - emergency response teams? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | <i>Controlled copies none recently</i> <i>no haz waste tanks</i> |
| (725.154) | Has the contingency plan been reviewed and revised whenever: a) regulations are revised? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> b) the plan fails in an emergency? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> c) the facility changes in a way that modifies the emergency response necessary? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> d) information regarding emergency coordinators changes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> e) information regarding equipment changes? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | |
| (725.155) | Is the emergency coordinator on-site or on call at all times? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Is the emergency coordinator familiar with all facility activities, wastes, records, layout and contingency plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Does the emergency coordinator have the authority to commit the resources needed to carry out the actions specified in the contingency plan? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | | | | |
| (725.156) | If the facility has had a release, fire or explosion, have the procedures of this Section been followed regarding assessment, response and reporting? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> | | | | |
| Note: If the facility has had a release, explain in detail. | | | | | |

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|---|----------------------|
| (725.116a) | <p>Section 725.116 Personnel Training</p> <p>Does the facility have a training program? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Have facility personnel successfully completed a program of classroom or on-the-job training that teaches them to perform their duties in a way that ensures the facility's compliance with the requirements of Part 725? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Is the program directed by a person trained in hazardous waste management procedures? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Does the program teach facility personnel hazardous waste management procedures (including contingency plan implementation) relevant to the positions in which they are employed? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Does the program cover, at a minimum:</p> <ul style="list-style-type: none"> - procedures to familiarize facility personnel with emergency procedures, emergency equipment and emergency systems? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - procedures for using, inspecting, repairing and replacing facility emergency and monitoring equipment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - key parameters for automatic waste feed cut-off systems? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - communications or alarm systems? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> - response to fire or explosions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - response to groundwater contamination incidents? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> - shutdown of operations? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | |
| (725.116b) | <p>Have new employees completed the program within 6 months of the date of employment or assignment to a position requiring them to manage hazardous waste? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <i>within 90 days</i></p> | |
| .116c) | <p>Have facility personnel received an annual review of the initial training? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |
| (725.116d) | <p>Are the following documents and records being maintained at the facility:</p> <ol style="list-style-type: none"> 1) the job title for each position related to hazardous waste management and the name(s) of the employee(s) filling each job? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> 2) a written job description for each position above, including the requisite skill, education or other qualifications and duties of personnel assigned to each position? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> 3) a written description of the type and amount of both initial and continuing training that will be given to each person filling a position dealing with hazardous waste management? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> 4) records documenting that the training or job experience has been given to and completed by facility personnel? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> | <i>all employees</i> |
| (725.116e) | <p>Is the facility maintaining training records until closure of the facility and those of former employees for at least 3 years from the last date of employment? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> | |

Weekly Inspection of
Satellite Storage Areas:

- ① Waste Reactor Room T-82
- ② QC Storage Area
- ③ Univ. Waste Storage
- ④ Emerg. Equipment.

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|------------|--|------------|
| 722.107(a) | Section 722.107 Waste Analysis and Recordkeeping Has the generator who treats a prohibited waste in tanks or containers in order to meet the treatment standards developed and followed a waste analysis plan? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Is the plan on-site? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Does the plan include a detailed physical and chemical analysis? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Has the plan been filed with the Agency at least 30 days prior to commencement of treatment activity? Yes _____ No _____ N/A <input checked="" type="checkbox"/> Has the generator submitted the required notification and certification that the waste meets treatment standards when the waste is shipped off-site? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | |
| 722.134(c) | Section 722.134 Satellite Accumulation Is the generator who accumulates hazardous waste at or near any point of generation where wastes initially accumulate and which is under the control of the operator of the process generating the waste limiting such accumulation to 55 gallons of hazardous waste or 1 quart of acutely hazardous waste marking the containers with the words "Hazardous Waste" or other words identifying the contents? Yes <input checked="" type="checkbox"/> No _____ N/A _____ Has the generator who accumulates more than 55 gallons of hazardous waste or 1 quart of acutely hazardous waste complied with the requirements of Section 722.134(a) within 3 working days? Yes _____ No _____ N/A <input checked="" type="checkbox"/> If there are more than 55 gallons of hazardous waste or 1 quart of acutely hazardous waste in the satellite accumulation area, are the containers marked with the date accumulation began? Yes _____ No _____ N/A <input checked="" type="checkbox"/> During the 3 day period, is the generator continuing to comply with the requirements of Section 722.134(c)(1) with respect to the excess waste? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.134(c) |
| | SUBPART D: RECORDKEEPING AND REPORTING | |
| 722.140(a) | Section 722.140 Recordkeeping Has the generator retained for a period of 3 years: - a copy of each signed manifest? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.140(a) |
| 722.140(b) | Has the generator retained a copy of each Annual Report and Exception Report for a period of at least three years from the due date of the report (March 1)? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.140(b) |
| 722.140(c) | Has the generator retained for a period of 3 years: - copies of test results, waste analyses or other determinations made in accordance with Section 722.111? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.140(c) |
| 722.140(d) | Does a generator who is involved in any unresolved enforcement action or as requested by the Director continue to maintain the records required in subsections a) and c)? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | 722.140(d) |
| 722.141(a) | Section 722.141 Annual Reporting Has the generator who ships hazardous waste off-site for treatment, storage or disposal filed an annual report with the Agency by March 1 for the preceding calendar year? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.141(a) |
| 722.141(b) | Note: If "No", or if deficiencies are noted with the annual report reviewed, contact the Planning and Reporting Section. Has the generator who treats, stores or disposes of hazardous waste on-site, filed an annual report with the Agency by March 1 for the preceding calendar year? Yes <input checked="" type="checkbox"/> No _____ N/A _____ | 722.141(b) |

Surfactants, 15 acres, ^{about 1997} ~~1997~~ - 5 years ago, 1997
Annual Report 2002

Ignitable Process Waste, Ethanol D001
952.

Ignitable & Corrosive liquid waste; Chloroform,
methylene chloride D001, D002, D022, F005,
F002. 1046.8

Hazard. Chem. Tanker Wash, ethylene oxide
& propylene oxide 302869.0

Ignitable liquid recovered from chem. process.
Methanol, benzyl alcohol 3857.0

Used Aerosol Cans w/flammable propellant
D001 → 200.

Lab waste mixed solvents. 423

Ignital & corrosive spill residue; ethylene oxide
55.

Ignitable spill residue, ethylene oxide.
U115 D001 53.

Ignitable analytical lab waste, mixed solvents
Xylene D001, F003, F005, D022, F002

spill residue; cresols.

waste ignitable liquid; octene, as byproduct
D001

| Regulation | RCRA GENERATOR INSPECTION CHECKLIST (PART 722) | Violation |
|---------------|---|---------------|
| 722.142(a)(1) | Section 722.142 Exception Reporting If the generator has not received a copy of the manifest from the TSD facility within 35 days of the date of delivery to the transporter, has the generator contacted the transporter or the TSD facility to determine the status of the hazardous waste? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | 722.142(a)(1) |
| 722.142(a)(2) | If the generator has not received a copy of the signed manifest within 45 days of the date of delivery to the transporter, has he filed an exception report with the Agency in accordance with the requirements of this Section? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | 722.142(a)(2) |
| 722.143 | Section 722.143 Additional Reporting Has the generator furnished additional reports as required by the Director? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | 722.143 |
| | SUBPART E: EXPORTS OF HAZARDOUS WASTE Is the generator an exporter of hazardous waste? Yes _____ No <input checked="" type="checkbox"/> N/A _____ If "Yes", has the generator complied with the requirements of Subpart E? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | |
| | SUBPART F: IMPORTS OF HAZARDOUS WASTE Is the generator an importer of hazardous waste? Yes _____ No <input checked="" type="checkbox"/> N/A _____ If "Yes", has the generator complied with the requirements of Subpart F? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | |
| | SUBPART G: FARMERS Is the generator a farmer? Yes _____ No <input checked="" type="checkbox"/> N/A _____ If "Yes", has the generator complied with the requirements of Subpart G? Yes _____ No _____ N/A <input checked="" type="checkbox"/> | |
| | COMMENTS: | |

TM:jab\722gen2.wpd

LQG \Rightarrow < 90 days containers only

T. Re Air permit \Rightarrow eqs. or non eqs. sources
more unpermitted Major Source VCC.

Permit #'s 097035 AAR 12/20/2000

Expires 9/6/06

- Totes Used Del

- Light bulbs & batteries

- 1 lab
1 prod.

1 aerosol cans

- 1 90 day storage

Manifest Review

CDR - w/each shipment

AR 1378491 \Rightarrow D009 RC Waste Mercury

AR 1378490 F003 Waste Flam Liquid

D001 Waste Oxidizing Liquid

D001 Waste Corrosive Liquid

D002 Waste Corrosive Liquid.

AR 1334779 12/27/02 OK

No process vents AA, no equip leaks BB
No Subpart CC.



Waste, Pesticides and Toxics Division

Type of Document: ☐ Notice of Violation and Inspection Report/Checklist
☒ No Violation Letter and Inspection Report/Checklist
☐ Letter of Acknowledgment
☐ Information Request
☐ Pre-Filing and Opportunity to Confer
☐ State Notification of Enforcement Action

Facility Name: BASF Corporation

Facility Location: 3938 Porett Drive

City: Gurnee State: IL 60031

U.S. EPA ID# IL0 055 413 371

Assigned Staff Diane Sharraw Phone: X 6-6199

| Name | Signature | Date |
|------------------|-----------------------------------|---------------|
| Author | <i>Diane Sharraw</i> | <i>6-9-3</i> |
| Regional Counsel | | |
| Section Chief | <i>Robert Blum Smith for LANS</i> | <i>060903</i> |
| Branch Chief | | |

Directions/Request for Clerical Support:

After the Section Chief/Branch Chief signs this sheet and original letter:

1. Date stamp the cover letter;
2. Make four copies of the contents of this folder:
 - One copy for the assigned staff;
 - One copy for the section file;
 - One copy for the branch file; and
 - One copy for the official file.
3. Make any additional copies for cc's or bcc's.
4. Mail the original certified mail and distribute office copies and cc's and bcc's.
Once the certified mail receipt is returned:
5. File the certified mail receipt (green card), with this sign-off sheet and the official file copy, and take to 7th floor RCRA file room;
6. E-mail staff the date that the letter was received by facility.

7001 0320 0006 0201 5647

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David L. Van Lewen, CIH
Mgt. Safety and Ecology
BASF Corporation
3938 Pore++ Drive
Gulnee, IL 60031

2. Article Number

(Transfer from service label)

7001 0320 0006 0201 5647

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

6/12/03

C. Signature

X

☐ Agent☒ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Ms. Diane Sharrow
USEPA
Region 5
77 West Jackson Boulevard
DE - 9J
Chicago, IL 60604

RE: Compliance Evaluation Inspection
EPA I.D. No.: ILD 055 413 371

Dear Ms. Sharrow

This letter is in response to your request to review the report of the inspection conducted June 3, 2003. I have reviewed your report and checklist and have found no errors or omissions

I appreciate your fast response and professionalism during the inspection

Sincerely,



David Van Lewen
Manager, Safety and Ecology

BASF

Thomas W. O'Rourke

Operations Director, Surfactants

BASF Corporation
3938 Porett Drive
Gurnee, Illinois 60031-1281

Telephone (847) 249-6378
Fax (847) 249-6790
E-mail: orourkt@basf.com

Chemicals

BASF

David L. Van Lewen, CIH

Manager, Safety & Ecology

BASF Corporation
3938 Porett Drive
Gurnee, Illinois 60031

(847) 249-6360
800 447-0825 Ext. 6360
Fax (847) 249-6935
E-mail: vanlewd@basf.com

BASF

Gary J. Krause

Ecology and Safety Coordinator

BASF Corporation
3938 Porett Drive
Gurnee, Illinois 60031

(847) 249-6371
(847) 244-3410
Fax (847) 244-6935
Internet: krauseg@basf.com

Detailed Facility Report

Report
ErrorData
Dictionary

For Public Release - Unrestricted Dissemination Report Generated on 05/27/2003
US Environmental Protection Agency - Office of Enforcement and Compliance Assurance

Facility Permits and Identifiers

Data Dictionary

| Statute | System | Source ID | Facility Name | Street Address | City | State | Zip |
|---------|--------|-----------------|------------------|-----------------|--------|-------|-------|
| | FRS | 110000429457 | BASF CORPORATION | 3938 PORETT DR. | GURNEE | IL | 60031 |
| CAA | AFS | 1709700015 | BASF CORP | 3938 PORETT DR | GURNEE | IL | 60031 |
| RCRA | RCR | ILD055413371 | BASF CORP | 3938 PORETT DR | GURNEE | IL | 60031 |
| EP313 | TRI | 60031MZRCH3938P | BASF CORP. | 3938 PORETT DR. | GURNEE | IL | 60031 |

Facility Characteristics

Data Dictionary

| Statute | Source ID | Facility Status | Permit Expiration Date | Lat/Long | Indian Lands? | Primary SIC | Secondary SICs |
|---------|-----------------|------------------------------------|------------------------|--|---------------|-------------|----------------|
| | 110000429457 | | | LRT lat: 42.3833 LRT long: -87.9014 | NA | | |
| CAA | 1709700015 | Operating, Major (Fed. Rep.) | | | NA | 2843 | |
| EP313 | 60031MZRCH3938P | | | lat: 42.3844 long: -87.8931 | NA | 2843 | |

Inspection and Enforcement Summary Data

Data Dictionary

| Statute | Source ID | RECAP Insp. Last 05Yrs | Date of Last Inspection | Formal Enf Act Last 05 Yrs | Penalties Last 05 Yrs |
|---------|--------------|------------------------|-------------------------|----------------------------|-----------------------|
| CAA | 1709700015 | 0 | 06/24/1998 | 1 | \$00 |
| RCRA | ILD055413371 | 0 | Never | 0 | \$00 |

Inspection History (05 years)

Data Dictionary

| Statute | Source ID | Inspection Type | Lead Agency | Date |
|-----------------------------|-----------|-----------------|-------------|------|
| - No data records returned. | | | | |

Entries in *italics* are not considered inspections in Reporting for Enforcement and Compliance Assurance
Priorities (RECAP) official counts.

Compliance Summary Data

Data Dictionary

| Statute | Source ID | Current SNC/HPV? | Current Quarter | Description | Qtrs in NC (of 8) |
|---------|--------------|------------------|-----------------|-------------|-------------------|
| CAA | 1709700015 | NO | Apr-Jun03 | | |
| RCRA | ILD055413371 | NO | Apr-Jun03 | | 0 |

Two Year Compliance Status by Quarter

Data Dictionary

| AIR Compliance Status | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|---------|
| Statute:Source ID | QTR1 | QTR2 | QTR3 | QTR4 | QTR5 | QTR6 | QTR7 | QTR8 |
| CAA: 1709700015 | Jul-Sep01 | Oct-Dec01 | Jan-Mar02 | Apr-Jun02 | Jul-Sep02 | Oct-Dec02 | Jan-Mar03 | Apr-Jun |
| HPV History | | | | | | | | |
| Program/Pollutant in Current Violation | | | | | | | | |
| TITLE V PERMITS | | | | UNKNOWN | UNKNOWN | UNKNOWN | UNKNOWN | UNKNO |
| SIP | UNKNOWN | UNKNOWN | UNKNOWN | UNKNOWN | UNKNOWN | UNKNOWN | UNKNOWN | UNKNO |

High Priority Violator (HPV) History section: "Unaddr" means the facility has not yet been addressed with a formal enforcement action. "Addr" means the facility has been addressed with a formal enforcement action, but its violations have not been resolved. Lead Agency designated can be US EPA, State, Both, or No Lead Determined. If HPV History is blank, then the facility was not a High Priority Violator. C=Compliance; V=Violation; S=Compliance Schedule.

Formal Enforcement Actions (05 year history)

[Data Dictionary](#)

| Statute | Source ID | Type of Action | Lead Agency | Date | Penalty | Penalty Description |
|---------|------------|-----------------------------------|-------------|------------|---------|---------------------|
| CAA | 1709700015 | STATE ADMINISTRATIVE ORDER ISSUED | State | 11/28/2001 | \$00 | |

In some cases, formal enforcement actions may be entered both at the initiation and final stages of the action. These may appear more than once above. Entries in *italics* are not "formal" actions under the PCS definitions but are either the initiation of an action or penalties assessed as a result of a previous action. This section includes US EPA and State formal enforcement actions under CAA, CWA and RCRA.

EPA Formal Enforcement Cases (05 year history)

[Data Dictionary](#)

| Primary Law/Section | Case Number | Case Type | Case Name | Issued/Filed Date | Settlement Date | Penalty | SEP Cost |
|-----------------------------|-------------|-----------|-----------|-------------------|-----------------|---------|----------|
| - No data records returned. | | | | | | | |

Federal enforcement actions and penalties listed in this section may duplicate records in the Formal Enforcement Actions section.

History of Reported Chemicals Released in Pounds per Year at Site:60031MZRCH3938P

[Data Dictionary](#)

Chemical releases reported to TRI are provided for context and are not associated with non-compliance for that facility.

| Year / | Total Air Emissions | Surface Water Discharges | Underground Injections | Releases to Land | Total On-site Releases | Total Off-site Transfers | Total Releases and Transfers |
|--------|---------------------|--------------------------|------------------------|------------------|------------------------|--------------------------|------------------------------|
| 1992 | 4,119 | | | | 4,119 | 46,876 | 50,995 |
| 1993 | 3,297 | | | | 3,297 | 45,716 | 49,013 |
| 1994 | 3,524 | | | 209 | 3,733 | 22,604 | 26,337 |
| 1995 | 3,415 | | | | 3,415 | 20,704 | 24,119 |
| 1996 | 3,046 | | | | 3,046 | 26,439 | 29,485 |
| 1997 | 3,227 | | | 4,800 | 8,027 | 32,018 | 40,045 |
| 1998 | 2,472 | | | 4,620 | 7,092 | 50,531 | 57,623 |
| 1999 | 1,111 | | | | 1,111 | 37,796 | 38,907 |
| 2000 | 834 | | | | 834 | 34,194 | 35,028 |

TRI Total Releases and Transfers by Chemical and Year

Chemical releases and transfers are in pounds except where otherwise noted.

| Chemical Name | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 2000 |
|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| CERTAIN GLYCOL ETHER | 14,888 | 14,435 | 4,553 | 5,622 | 4,960 | 4,218 | | | 1,684 |
| METHANOL | 29,568 | 29,719 | 16,571 | 13,571 | 21,965 | 27,099 | 15,803 | | |
| N-BUTYL ALCOHOL | 1,326 | 1,098 | 819 | 851 | | | | | |
| ETHYLENE OXIDE | 1,802 | 1,108 | 1,145 | 1,219 | 1,193 | 946 | 1,151 | 450 | 187 |
| PROPYLENE OXIDE | 599 | 278 | 232 | 208 | 232 | 240 | 230 | 355 | 63 |
| 4,4'-ISOPROPYLIDENED | | | | | | 6,275 | 5,785 | 7,001 | 2,804 |
| ETHYLENE GLYCOL | 1,035 | 769 | 782 | 770 | | | 33,528 | 31,101 | 30,290 |
| MALEIC ANHYDRIDE | 165 | 113 | 442 | 277 | | | | | |
| CRESOL (MIXED ISOMER | 1,611 | 1,492 | 1,792 | 1,600 | 1,135 | 1,267 | 1,126 | | |
| PHOSPHORIC ACID | 1 | 1 | 1 | 1 | | | | | |

Demographic Profile of Surrounding Area (3 Miles) Switch to 1 Mi 5 Mi[Data Dictionary](#)

This section is to provide context regarding the community setting of the facility. No relationship between this information, and other data included in this report is implied. Statistics are based upon the 2000 US Census data, and are accurate to the extent that the facility latitude and longitude listed below are correct. The latitude and longitude are obtained from the EPA Locational Reference Table(LRT) when available. N/A = Not yet available from the Census Bureau for 2000 Census.

| | | | | | |
|-------------------|----------|---------------------|-----------------|----------------------------------|--------|
| Radius of Area: | 3 Miles | Land Area: | 99.49% | Households in area: | N/A |
| Center Latitude: | 42.3833 | Water Area: | 0.51% | Housing units in area: | 24,862 |
| Center Longitude: | -87.9014 | Population Density: | 2509.74/sq. mi. | Households On Public Assistance: | N/A |
| Total Persons: | 67,744 | Percent Minority: | 49.78% | Persons Below Poverty Level: | N/A |

| Race Breakdown | Persons (%) | Age Breakdown: | Persons (%) |
|-------------------------|-----------------|------------------------------|-----------------|
| White: | 42,845 (63.25%) | Child 5 years and less: | 5,946 (8.78%) |
| African-american: | 8,925 (13.17%) | Minors 17 years and younger: | 19,499 (28.78%) |
| Hispanic-Origin: | 19,891 (29.36%) | Adults 18 years and older: | 48,081 (70.97%) |
| Asian/Pacific Islander: | 3,594 (5.31%) | Seniors 65 years and older: | 3,319 (4.90%) |
| American Indian: | 286 (0.42%) | | |
| Other race: | 12,094 (17.85%) | | |

| Education Level (Persons 25 & older) | Persons (%) | Income Breakdown: | Households (%) |
|---|-------------|------------------------|----------------|
| Less than 9th grade: | N/A | Less than \$15,000: | N/A |
| 9th-12th grades: | N/A | \$15,000-\$25,000: | N/A |
| High School Diploma: | N/A | \$25,000-\$50,000: | N/A |
| Some College/2-yr: | N/A | \$50,000-\$75,000: | N/A |
| B.S./B.A. or more: | N/A | Greater than \$75,000: | N/A |

Please note: Entries in gray denote records that are not federally required to be reported to EPA. These data may not be reliable.

Map Returned Facility

This report was generated by the Integrated Data for Enforcement Analysis (IDEA) system, which updates its information from program databases monthly. The data were last updated: AFS: 05/10/2003. RCRAInfo: 05/09/2003. FRS: 05/08/2003. TRI: 05/15/2003.

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Annual RCRA Hazardous Waste Refresher Training

TRIM Course Code – REG E001

This is to verify associate's attendance and participation in the course,
"Annual RCRA Hazardous Waste Refresher Training".

This course covers the EPA and OSHA requirements for handling hazardous waste and trains associates in the types of hazardous waste generated, spill plan/emergency response, safety procedures, etc. After completing this course the trainee will have knowledge of the hazardous waste generated at the Gurnee facility, proper handling of hazardous waste and in the event of an emergency, how to respond.

Reference: EPA 265.16 and OSHA 1910.120.

Employee Name: _____

Employee ID #: _____

Department: _____

Employee
Signature: _____ Date: _____

Trainer
Signature: _____ Date: _____

-
1. The Gurnee Site's obsolete surfactant waste stream is hazardous according to RCRA regulations.
TRUE FALSE
 2. Flammable solvents (ethanol and methanol) are RCRA hazardous wastes.
TRUE FALSE
 3. A Large Quantity Generator may store Hazardous Waste on site for up to:
A. 60 DAYS B. 90 DAYS C. 180 DAYS
 4. RCRA Regulations define a hazardous waste as any material that has which of the following characteristics.
A. Toxic C. Corrosive E. All of the above
B. Ignitable D. Reactive
 5. Name the three Satellite Accumulation Areas at the Gurnee Site.
• _____
• _____
• _____
 6. Satellite Accumulation Areas are limited to 55 gallons or less.
TRUE FALSE
 7. Universal Wastes are: (circle all that apply)
A. Thermostats with mercury C. Batteries
B. Fluorescent lamps D. Obsolete Surfactants
 8. The OSHA and RCRA definitions of flammable are different. OSHA defines flammables as having a flash point < 100°F and RCRA defines flammables as having a flash point
A. < 140°F C. < 212°F
B. < 100°F D. < 0°F
 9. If you notice a leaking hazardous waste container, you should...
A. Throw rags on it and tell the next shift to clean it up.
B. Contact your supervisor and/or the Hazmat Team.
C. Call the Gurnee Fire Department.
D. All of the above.

**MANAGEMENT OF
HAZARDOUS WASTE
“CRADLE TO GRAVE”**

1. GENERATION
2. ACCUMULATION
3. TRANSPORTATION
4. TREATMENT/DISPOSAL

GENERATION

We are a Large
Quantity Generator

LAB WASTE
SIDE STREAMS
OBSOLETE AND OFF SPEC

**HAZARDOUS WASTE
DETERMINATION**
LISTED (SPECIFIC MATERIAL OR
PROCESS)

CHARACTERISTIC (GENERAL
PROPERTIES)

CHARACTERISTIC WASTE IS

1. IGNITABLE
2. CORROSIVE
3. TOXIC
4. REACTIVE

(OR ANY COMBINATION OF THESE
FOUR)

DETERMINATION IS MADE
BY EH&S DEPT.

ACCUMULATION

SATELLITE AREA
-55 GALLON CONTAINER MAX
-NO TIME LIMIT
-UNDER CONTROL OF OPERATOR
(Q.C. WASTE CANS)
or
90 DAY AREA
-NO LIMIT ON VOLUME
-90 DAY MAX ON SITE
(SYSTANKS)

TRANSPORTATION

LICENSED WASTE HAULER

DOT REGULATIONS- PROPER
PLACARDS

WASTE MANIFEST

MORE EXTENSIVE
TRAINING IS REQUIRED TO
PREPARE AND SIGN A
HAZARDOUS WASTE

MANIFEST

-Jim Marks

-Dave Van Lewen

-Tim Heidorn

TREATMENT /DISPOSAL

CORPORATE PARTNERS

-ASSURE PROPER TREATMENT

-LIMIT LIABILITY

EMERGENCY RESPONSE

A SPILL IS CONSIDERED A
HAZMAT SITUATION

HAZMAT TEAM WILL CONDUCT
CLEAN-UP

INTERNAL INCIDENT REPORTING

- FOLLOW ESTABLISHED PROCEDURE FOR REPORTING OF ANY INCIDENT OR SPILL INVOLVING HAZARDOUS WASTE
- EHS DEPARTMENT WILL INITIATE
- INVESTIGATION AND FOLLOW UP

UNIVERSAL WASTE
USED PRODUCTS THAT ARE
POTENTIALLY HAZARDOUS TO
ENVIRONMENT

EXAMPLES:

>FLORESCENT LIGHT BULBS

>USED BATTERIES

UNIVERSAL WASTE
STORAGE AREAS
WEST OF MAINTENANCE SHOP
IN BUILDING TWO

LABELS NEED START DATE

1 YEAR ACCUMULATION
WE USUALLY SHIP OUT EVERY
QUARTER

STORMWATER

ONLY RAINFALL ,RUNOFF AND
SNOW MELT ARE ALLOWED TO
LEAVE THE SITE VIA THE
STORMWATER DRAINAGE

STORMWATER POLLUTION PREVENTION

- Contain and clean up spills as soon as possible
- Don't leave dirty or partial drums or equipment
outside without a secure lid
- Only pump clean water to the ditch or ground

INTERNAL INCIDENT REPORTING (SAME AS HAZARDOUS WASTE.)

- FOLLOW ESTABLISHED PROCEDURE
FOR REPORTING OF ANY INCIDENT
OR SPILL INVOLVING HAZARDOUS
WASTE
- EHS DEPARTMENT WILL INITIATE
- INVESTIGATION AND FOLLOW UP

New Policy on sumps and dikes

Low risk areas, clean appearance
goes to ditch

High Risk, go to treatment system,
unless analytical is approved

LOW RISK AREAS:

Low risks sumps collect stormwater from an area
that has minimal hose connections, rotating
equipment seals, minimal sample points, and just a
few storage vessels. It is expected that the
stormwater collected from low risk sumps will
generally be suitable for discharge to the
stormwater ditch.

HIGH RISK AREAS :

High-risk sumps collect stormwater from
operating areas that have significant hose
connections, rotating equipment, sample
points, and multiple storage vessels. It is
anticipated that the stormwater collected from
high-risk sumps generally may not be suitable
for direct discharge to the stormwater ditch.

| <u>SUMP #</u> | <u>AREA/LOCATION</u> | <u>RISK</u> |
|---------------|--|-------------|
| 101 | TRIANGLE/T48 NORTH OF REACTOR ROOM | L |
| 102 | RAILROAD SIDING OUTSIDE NORTH OF HI RISE | L |
| 103 | NORTH PIT OUTSIDE WEST OF REACTOR ROOM | H |
| 201 | 4 PACK OUTSIDE BLD 1 | H |
| 205 | OUTSIDE CENTERYARD TANK FARMS BLD 1 | L |
| 202 | WEST TANK FARM OUTSIDE BLD 1 | H |
| 204 | EAST TANK FARM OUTSIDE BLD 1 | H |
| 203 | TRUCK LOADING/UNLOADING OUTSIDE BLD 1 | L |

